John Cranford,
M. D.

TRANSACTIONS

OF THE

COLLEGE OF PHYSICIANS,

OF PHILADELPHIA.

VOLUME I.——PART I.

NON SIBI SED TOTI.

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PREFACE.

MEDICAL Communications have been generally found to be amongſt the moſt certain and extenſive means of improving the practice of phyſic.

WE therefore offer the preſent work as a pledge *to our medical brethren that we ſhall publiſh as often as materials are afforded.*

THE accuracy and Fidelity of the facts muſt reſt entirely upon the credit of their reſpective authors. No papers merely ſpeculative can be admitted; and it is expected none will be offered us, which have been communicated to any other ſociety.

The Tables which commence this Volume we give as the moſt faithful Regiſter of Diſeaſes which

which could be procured—we believe them to be accurate, and intend that they shall be regularly continued.

Ever since the Institution of the College one of their principal views has been the formation of an American Pharmacopœia. *To make this work more generally useful, circular letters were several years since addressed to all the known Medical Societies, and to many of the Practitioners of Physic in the United States, requesting their advice and assistance. The small number of communications on this subject, have hitherto retarded the completion of their design.*

The utility of recording Epidemics is so evident, that we regret having no more accounts of the Influenza of 1789, *to insert in the first part of our First Volume. We hope, however, that this deficiency will be supplied before a second publication. It is not only of these more uncommon disorders that accounts would be acceptable, but a knowledge of the peculiar appearance of many others in America, such as measles, scarlatina, &c. would be highly serviceable, as well for the investigation of diseases,*

eaſes, as for the aſſiſtance of the practitioner, who ſees them for the firſt time, and who feels embarraſſed from the want of ſuch information, as reports of this kind could not fail to give.

We conclude with an aſſurance, that ſtrict impartiality ſhall be obſerved in ſelecting papers for publication, and no unneceſſary delay admitted.

Philadelphia July 5th, 1793.

1813
COLL. OF PHYSICIANS

AN ACT

FOR THE

INCORPORATION

OF

THE COLLEGE OF PHYSICIANS OF PHILADELPHIA.

WHEREAS the Phyſicians of Philadelphia, influenced by a conviction of the many advantages which have ariſen from literary inſtitutions, have aſſociated themſelves under the name and title of *The College of Phyſicians of Philadelphia.*

AND WHEREAS, the objects of this College are to advance the ſcience of medicine, and thereby to leſſen human miſery, by inveſtigating the diſeaſes and remedies which are peculiar to this country; by obſerving the effects of different ſeaſons, climates and ſituations upon the human body; by recording the changes which are produced in diſeaſes,

eaſes, by the progreſs of agriculture, arts, population and manners; by ſearching for medicines in the American woods, waters, and in the bowels of the earth; by enlarging the avenues to knowledge from the diſcoveries and publications of foreign countries; and by cultivating order and uniformity in the practice of phyſic.

AND WHEREAS, the ſaid College of Phyſicians have prayed us, the Repreſentatives of the Freemen of the Commonwealth of Pennſylvania, that they may be created a body politic and corporate, for ever, with ſuch powers, privileges and immunities as may beſt anſwer the laudable purpoſes which the members thereof have in view; wherefore to aſſiſt and encourage the ſaid College of Phyſicians in the proſecution and advancement of uſeful knowledge, for the benefit of their country and of mankind:

Be it enacted, and it is hereby enacted, by the Repreſentatives of the Freemen of the Commonwealth of Pennſylvania, in General Aſſembly met, and by the authority of the ſame, That the members of the ſaid College of Phyſicians, *that is to ſay*, John Redman, John Jones, William Shippen, *junior*, Adam Kuhn, John Morgan, Benjamin Ruſh, Samuel Duffield, Gerardus Clarkſon, George Glentworth, Thomas Parke, James Hutchinſon, Robert Harris,

ris, John Carſon, Benjamin Duffield, William W. Smith, John Foulke, Samuel Powel Griffitts, William Clarkſon, William Currie, Benjamin Say, Andrew Roſs, John Morris, Nathan Dorſey, James Cuningham, Caſpar Wiſtar, *junior*, Michael Leib, and John H. Gibbons, be, and the ſame perſons are, and ſhall be a body corporate and politic in deed and in name, by the name and ſtile of "*The College of Phyſicians of Philadelphia*," and by the ſame name, they and their ſucceſſors, are hereby conſtituted and and confirmed one body corporate and politic in law, to have perpetual ſucceſſion, and to be able and capable to have, hold and enjoy, any goods and chattels, lands, tenements, rents, hereditaments, gifts, and bequeſts, of what nature ſoever, in fee-ſimple, or for term of years, life or lives, or otherwiſe; and alſo to grant, ſell, alien, aſſign, or let the ſame lands, tenements, hereditaments and premiſes, according to the nature of the reſpective grants and bequeſts made to the ſaid corporation, and of the eſtate of the ſaid corporation therein, provided that the amount of the clear yearly value of ſuch real eſtate exceed not the ſum of five hundred pounds lawful money of this commonwealth.

And be it further enacted by the authority aforeſaid, That the ſaid corporation be, and ſhall be forever hereafter, able and capable in law, to ſue and

and be ſued, plead and be impleaded, anſwer and be anſwered unto, defend and be defended in all or any courts of juſtice and other places in all manner of ſuits, actions, complaints, pleas, cauſes and matters of what nature or kind ſoever; and that it ſhall and may be lawful to and for the ſaid corporation forever hereafter, to have and uſe a common ſeal, and the ſame ſeal, at the will and pleaſure of the ſaid corporation, to break, change, alter and renew.

And be it further enacted by the authority aforeſaid, That for the well ordering of the ſaid corporation and its affairs, there ſhall be, at all times hereafter, the following Officers of the ſame, that is to ſay, one Preſident, one Vice-Preſident, four Cenſors, a Secretary and a Treaſurer, who ſhall be choſen annually from amongſt the fellows of the ſaid College of Phyſicians, on the firſt Tueſday in the month of July forever hereafter, or within one kalendar month after the ſame day, in any year; and that John Redman, be the preſent *Preſident* of the ſaid College; John Jones, the preſent *Vice-Preſident;* William Shippen, *junior*, Adam Kuhn, Benjamin Ruſh and Samuel Duffield, the preſent *Cenſors;* Samuel Powel Griffitts, the preſent *Secretary*, and that Gerardus Clarkſon be the preſent *Treaſurer* of the ſaid College, and ſhall be and remain the Preſident, Vice-Preſident, Cenſors,

Cenſors, Secretary and Treaſurer, reſpectively, of the ſaid College, until they be ſuperſeded by a new election to be made by the fellows of the ſaid College as aforeſaid, and all vacancies by death, reſignation or otherwiſe, which ſhall at any time hereafter happen in any of the ſaid offices, may be filled by a ſpecial election, to be holden ſo often as occaſion ſhall require.

And be it further enacted by the authority aforeſaid, That the authorities and duties of the officers of the ſaid Corporation, who are herein before mentioned, and of any others which the ſaid Corporation ſhall ſee fit to appoint, the times of meeting of the ſaid Corporation, the admiſſion of members, and the other concerns of the ſaid Corporation, ſhall be regulated by the bye-laws and ordinances of the ſaid Corporation heretofore made or to be made, touching the premiſes.

Provided always, and be it enacted by the authority aforeſaid, That no bye-laws nor ordinances of the ſaid Corporation hereafter made, ſhall be binding upon the officers or members thereof, unleſs the ſame ſhall be propoſed at one regular meeting of the ſaid Corporation, and enacted and received at another, after the intervention of at leaſt thirty days. And that no ſale or alienation or leaſe for above three years, of any part of the real

real eſtate of the ſaid Corporation, ſhall be valid, unleſs the terms and nature of ſuch ſale or leaſe be propoſed at a previous meeting of the ſaid Corporation.

Signed by order of the Houſe,

RICHARD PETERS, *Speaker.*

Enacted into a Law at Philadelphia, on Thurſday, the twenty-ſixth day of March, in the year of our Lord one thouſand ſeven hundred and eighty-nine.

PETER ZACHARY LLOYD,
Clerk of the General Aſſembly.

CONSTITUTION

OF

THE COLLEGE OF PHYSICIANS OF PHILADELPHIA.

THE Phyſicians of Philadelphia, influenced by a conviction of the many advantages that have ariſen in every country from literary inſtitutions, have aſſociated themſelves under the name and title of "The College of Phyſicians of Philadelphia."

THE objects of this College are, to advance the ſcience of medicine, and thereby to leſſen human miſery, by inveſtigating the diſeaſes and remedies which are peculiar to our country; by obſerving the effects of different ſeaſons, climates and ſituations upon the human body; by recording the changes that are produced in diſeaſes, by the progreſs of agriculture, arts, population, and manners; by ſearching for medicines in our woods, waters and the bowels of the earth; by enlarging our avenues to knowledge, from the diſcoveries and

and publications of foreign countries; by appointing ſtated times for literary intercourſe and communications; and by cultivating order and uniformity in the practice of phyſic.

For the purpoſe of obtaining theſe objects, the following rules have been adopted.

I. The College ſhall conſiſt of fellows and aſſociates.

II. The fellows ſhall conſiſt of practitioners of Phyſic, of character in their profeſſion, who reſide in the city, or diſtrict of Southwark, or Liberties of Philadelphia, and are not under twenty-four years of age.

III. The aſſociates ſhall conſiſt of perſons of merit in the profeſſion of medicine, who do not live within the limits above deſcribed.*

IV. Three-

ADMISSION OF ASSOCIATES.

* I. The number of aſſociates ſhall not exceed forty, except when fellows remove beyond the limits preſcribed by the conſtitution, in which caſe they ſhall be conſidered as aſſociates without an election. Ten of the aſſociates ſhall be foreigners.

II. The aſſociates ſhall conſiſt only of perſons above thirty years of age, who are of well known and eſtabliſhed character in medicine.

III. The ſame forms ſhall be obſerved in electing aſſociates as in electing fellows of the College, except that they ſhall be

IV. THREE-FOURTHS of the whole number of fellows met, ſhall concur in the admiſſion of a fellow or aſſociate.

V. THE Officers of the College ſhall conſiſt of a Preſident, Vice-Preſident, four Cenſors, a Treaſurer and Secretary, who ſhall be choſen annually, from amongſt the fellows, on the firſt Tueſday in July.

VI. THE ſtated meetings of the College ſhall be on the firſt Tueſday in every month; beſides theſe meetings, the Preſident, or, in caſe of his abſence or indiſpoſition, the Vice-Preſident, ſhall have power to call extraordinary meetings, whenever important or unexpected buſineſs ſhall require, of which he ſhall be the judge. It ſhall likewiſe be in the power of any ſix fellows of the College, who concur in their deſires for a meeting, to authoriſe the Preſident, or, in caſe of his abſence or indiſpoſition, the Vice-Preſident, to call it.

VII. THE buſineſs of the Cenſors ſhall be to inſpect the records, and examine the accounts and expenditures

be propoſed by a fellow inſtead of making a written application. Every aſſociate ſhall be furniſhed with a certificate from the College, ſigned in the ſame manner as thoſe which are given to the fellows.

IV. THE aſſociates, when in this city, ſhall have the privilege of attending the meetings of the College, but without taking any part in the private buſineſs thereof.

expenditures of the College, and report thereon. And all communications made to the College, after being read at one of their ſtated meetings, ſhall be referred to the Preſident, Vice-Preſident, Cenſors, and ſuch other Members of the College as ſhall be nominated for the purpoſe; who ſhall determine by a vote, taken by ballot, on the propriety of publiſhing them in the Tranſactions of the College.*

VIII. The buſineſs of the Secretary ſhall be to keep minutes of all the meetings and tranſactions of the Society, and to record them in a book provided for that purpoſe. Likewiſe to receive and preſerve all books and papers belonging, and letters addreſſed, to the College.

IX. The buſineſs of the Treaſurer ſhall be to receive all the monies of the College, and to pay them to the order of the Preſident or Vice-Preſident only: which order ſhall be the voucher for his expenditures.

X. Every member of the College ſhall have a certificate of his election, with the ſeal of the Col-

* All papers communicated to the College for publication, ſhall be referred to a printing committee, which is to conſiſt of the Preſidents and Cenſors, and a number of other members to be nominated when each memoir is referred to the committee; after which, the conſideration of the paper is to be conducted according to the ſeventh article of the Conſtitution.

lege affixed thereto, ſigned by the Preſident and Vice-Preſident, and counterſigned by the Cenſors and Secretary. The ſtyle of certificates, and of all addreſſes from the College, ſhall be as follows: *The Preſident*, or, *The Vice-Preſident, and College of Phyſicians of Philadelphia.*

XI. No aſſociate, who comes to reſide within the limits mentioned in the ſecond rule, ſhall be admitted to a fellowſhip in the College, without being elected in the manner preſcribed for the admiſſion of fellows—no new member ſhall be choſen who has not been propoſed at a previous ſtated meeting.

XII. No law nor regulation ſhall be adopted, that has not been propoſed at a previous ſtated meeting; nor ſhall any part of the conſtitution be altered, without being propoſed for conſideration, for three months. The Preſident, or Vice-Preſident, when he takes the chair, ſhall have no vote, except on queſtions where there is an equal diviſion of voices. Seven fellows ſhall be a quorum for all ordinary buſineſs; but for the expenditure of money, the making of laws, election of members, or altering the conſtitution, eleven fellows ſhall be a quorum.

XIII. Every fellow, upon his admiſſion, ſhall ſubſcribe to the above rules, as a teſtimony of his conſenting to be bound by them—he ſhall, at the

ſame time, pay into the hands of the Treaſurer, the ſum of *ten pounds*, towards eſtabliſhing a fund for the uſe of the College; he ſhall likewiſe pay *two dollars*, annually, for the ſame purpoſe.

THE following Phyſicians are the preſent members of the College.

FELLOWS.

John Redman, *Preſident.*
William Shippen, *junior*, *Vice-Preſident.*

Benjamin Ruſh,
Adam Kuhn,
Thomas Parke,
James Hutchinſon, } *Cenſors.*

Benjamin Say, *Treaſurer.*
Samuel Powel Griffitts, *Secretary.*

Samuel Duffield,
Robert Harris,
Benjamin Duffield,
John Foulke,
Andrew Roſs,
William Currie,
John Carſon,
Charles Moore,
Caſpar Wiſtar,
James Cuningham,
Nathan Dorſey,
Michael Leib,
John H. Gibbons,
Nicholas B. Waters,
Benjamin S. Barton,
Thomas Redman,
William M'Ilvaine,
P. F. Glentworth.

ASSOCIATES.

James Tilton, M. D. *Dover*, *Delaware.*
Nicholas Way, M. D. *Wilmington*, *Delaware.*
Iſaac Senter, M. D. *Newport*, *Rhode-Iſland.*

A DISCOURSE

DELIVERED BEFORE THE

COLLEGE OF PHYSICIANS

OF PHILADELPHIA, FEB. 6th, 1787.

ON THE OBJECTS OF THEIR INSTITUTION.

BY BENJAMIN RUSH, M.D. &c. &c.

MR. PRESIDENT AND GENTLEMEN,

I FEEL peculiar pleasure in reflecting, that the late revolution, which has given such a spring to the mind in objects of philosophical and moral enquiry, has at last extended itself to medicine, and in less than five years after the peace, before the human faculties had contracted to their former dimensions, a college of physicians, formed upon principles accommodated to the present state of society and government in America, has been established in the capital of the United States.

THE design of the present essay is to point out, in a few words, the advantages which, may be de-

rived from this inſtitution, and to ſuggeſt the many reſources, which our country offers for the improvement of medicine.

I SHALL conſider the objects and advantages of our inſtitution. 1ſt. as a College, and 2ndly, as a Medical Society.

I. By aſſuming the name of a College, we ſhall 1ſt. be able to introduce order and dignity into the practice of phyſic, by eſtabliſhing incentives and rewards for character. Men are generally anxious to preſerve the good opinion of thoſe with whom they are obliged to aſſociate. The reception we ſhall meet with from each other in our meetings will ſerve to correct or to improve our conduct. And if we are as chaſte as we ſhould be, in the admiſſion of members, a fellowſhip in our college will become in time, not only the ſign of ability, but an introduction to buſineſs and reputation in phyſic.

2ndly. By aſſuming the name of a College we may give a ſanction to an American Diſpenſatory —for I take it for granted, this will be one of the firſt objects of our attention.——

—THE

—The variety in the degrees, and perhaps nature of our diſeaſes, and the many remedies which are peculiar to our country, which have as yet no place in foreign diſpenſatories, render this undertaking a matter of abſolute neceſſity.

3dly. By means of our aſſociation, under the title of a College, we ſhall be better able to attract the attention of the government of our country, in matters that relate to the health and happineſs of our fellow citizens. In the year 1725, the College of Phyſicians of London, preſented an addreſs to the Britiſh Houſe of Commons, in which they bore ſuch a teſtimony againſt the pernicious effects of diſtilled ſpirituous liquors, as laid the foundation of ſeveral excellent laws, that were calculated to leſſen the conſumption, and of courſe, the fatal conſequences of thoſe liquors. The diſintereſtedneſs of ſuch interpoſitions of a medical faculty, in favour of the health and morals of their fellow citizens, cannot fail of enſuring their ſucceſs with a legiſlature.

4thly. By ſtated meetings as a College, we may promote enquiries and obſervations upon the prevailing diſeaſes of the city. Here the timid may be encouraged, and the ſanguine may be taught to doubt. Here the young practitioner may profit by the experience of the old, and the old by the boldneſs

boldneſs of enquiry, and modern improvements of the young. Here, uniformity in principle, and practice in medicine, will gradually inſinuate themſelves. Nor will the advantages of our conferrences end in the acquiſition of knowledge. The heart will naturally intereſt itſelf in the purſuits of the head. Here friendſhips will be contracted and cemented, and occaſional and unavoidable ſuſpicions or diſputes may here be accommodated by explanation or mediation. By theſe means we ſhall become, not only the guardians of the honor of the profeſſion, but likewiſe of each other's character.

II. As a MEDICAL SOCIETY aſſociated for the purpoſes of collecting and publiſhing medical obſervations and enquiries, an ample field lies open before us.

THE human body ſtill contains ſecrets which have eluded the enquiries of the anatomiſts and phyſiologiſts of the *old* world. Who knows but they may be reſerved by Heaven, to give immortality to the name of an American phyſician.

OUR country abounds with objects for the improvement of Chemiſtry, Botany, and Materia Medica. How few of the foſſil and vegetable ſubſtances peculiar to America, have been examined

mined by men capable of applying them to the purpoſes of medicine!

The winds, the local ſituations of the different parts of America, and the particular diet—dreſs—cuſtoms--manners—occupations—and buildings of our country, furniſh immenſe opportunities for the improvement of pathology.

It remains yet to be diſcovered and recorded, whether the extent of human life has been encreaſed or diminiſhed in America.

The effects of agriculture, horticulture, manufactures, commerce and civilization, in their progreſs from their firſt to their laſt ſtages, upon the health and life of man, can at preſent be aſcertained with preciſion in America. Here, too, we may diſcover the ſymptoms which gradually accompany the change of natural into artificial diſeaſes.

The comparative effects of the different articles of agriculture upon health, ſuch as wheat, Indian corn, rice, tobacco and indigo, remain yet to be explored in this country.

The cutting down of our woods has had a ſenſible effect upon our climate, and upon the health of our inhabitants. It remains yet to be determined

ed whether the increaſe of fevers from this cauſe, is produced by the encreaſe of exhalation, or by the progreſs of eaſterly winds weſtward, as has been ſuppoſed by Mr. Jefferſon, in his notes on Virginia.

It yet remains to aſcertain the full influence of cultivation upon our bodies. The higheſt degrees of it known in America, have had a viſible effect upon health. In Connecticut, one of the oldeſt and beſt cultivated ſtates in the union, remitting and intermitting fevers are ſeldom known.

It is certain that more rain and leſs ſnow have fallen in our winters, within theſe few years, than formerly. It becomes us to enquire, whether the change in the moiſture of our atmoſphere, from this cauſe, has added to the number or altered the ſymptoms of our diſeaſes.

The comparative influence of the moon on diſeaſes in this country, is a ſubject worthy of cloſe inveſtigation, though unfortunately hitherto but little attended to.

America furniſhes almoſt the only ſpot on the ſurface of the globe, to determine whether different forms of government have any influence upon health and life. In countries where power is confined, by hereditary ſucceſſion, to a few hands the effects of political paſſions are much limited. But even in theſe countries, we often read or hear of their

their baneful operation upon the human body. The abbe Richard tells us, it has more than once happened, that cardinals have died in twenty-four hours after the election of a pope—and I have heard a well-attested anecdote of a Swedish officer, who was seized with a bilious colic, which terminated in a palsy, from a rebuke which he met with from the present King of Sweden. In a country, where the safety, power, and offices of government are the objects of attention or desire of every man, it is a matter highly interesting to know what are the effects of the passions, which are excited by those objects, upon the human body. Are madness, melancholy, the hysteria and hypochondriasis, more frequent in republics than in monarchies? I think we are possessed of a sufficient number of facts to determine this question.

It remains yet to determine the comparative effects of *labour* and *learning* upon health and life. At present the former, compared with the latter, in the middle and southern states, is in the ratio of four to one. From the number and growth of the colleges and schools lately established in these states, it will be in our power to determine, in a few years, whether we have increased or diminished, with knowledge, the health of our fellow citizens.

The influence of religious opinions upon health and life may be diſcovered in America; for, by the principles and forms of our conſtitutions, a boldneſs and freedom of enquiry upon religious ſubjects have been introduced among us, which have been hitherto unknown in the world.

The effects of emigration upon life and health, have as yet been the ſubject of no enquiry. Is the *maladié de pays*, or homeſickneſs, ſo diſtreſſing and fatal to the Swiſs, common to all the emigrants from Europe on their firſt arrival among us? Are they moſt ſubject to our epidemic diſeaſes, the *firſt* or *ſecond* year after they arrive in our country? Is there any mode of preventing theſe diſeaſes? And laſtly, do theſe perſons exceed in health or life the natives of America? We have many facts which will enable us to determine each of theſe queſtions.

The effects of the mixture of the human ſpecies of different nations and countries upon health and life, may here be determined by accurate obſervations. It is certain, that the inferior ſpecies of animals are improved in ſtrength by the mixture. But further; the mulatto poſſeſſes ſtronger ſtamina than belonged to his father or mother. The ſize, ſtrength, health and longevity of Engliſhmen have been aſcribed to the intimate mixture of the blood of half the nations of Europe, from which they

are

are deſcended. To the effects of this mixture, likewiſe, may be aſcribed that elevation and perfection which the human underſtanſting has acquired in Great Britain. I take pleaſure in ſacrificing national prejudice to truth and philoſophy by introducing this obſervation, eſpecially as I anticipate the ſame national character from the operation of ſimilar cauſes upon the citizens of America.

THERE are ſeveral diſeaſes peculiar to our country which have never been deſcribed.

THE *vomiting* and *purging*, which are ſo frequent and fatal in the ſummer months, in all the cities of America, would furniſh an excellent ſubject for medical enquiry.

THE cauſe of the *decay of the teeth*, which is ſo frequent in the middle and eaſtern ſtates of America, will admit of much curious and uſeful ſpeculation.

THE ſudden and often fatal effects of a draught of cold water upon the human body in this city, and the remedies proper to remove them, will furniſh another ſubject for a medical communication*.

THE

* This ſubject has ſince been examined by the author, in a Volume of Medical Inquiries and Obſervations, publiſhed in 1788.

The qualities of our pump water, and the influence of building upon it, are proper ſubjects for chemical inveſtigation.

The reaſon why the ſuburbs and ſouth end of our city are more ſubject to autumnal fevers than its centre and north end, and why theſe fevers are leſs frequent within theſe three years than formerly, deſerve our attention.

The high price of fire-wood, makes it neceſſary to examine the effects of foſſil coal, and ſtove rooms, upon health and life.

The ſymptoms and degrees in which our acute and chronic diſeaſes agree and diſagree with the deſcriptions of the ſame diſeaſes publiſhed in Europe, will furniſh ample matter for obſervation.

An enquiry into the cauſes why the Dyſentery is equally the conſequence of a dry and wet ſummer, and why it appears on the ſummit of high grounds, while the vallies below them are viſited with remitting and bilious fevers, may lead us to determine, whether that diſorder be idiopathic, or whether it be the *febris introverſa* of Dr. Sydenham.

For the ſake of obtaining full information and accurate obſervations of the ſtate of the air and weather

weather (ſo eſſential to obtaining a hiſtory of diſeaſes), I would recommend to the College, to appoint one of their body for the following purpoſes.

1ſt. To record and communicate to the College an exact account of the temperature of the weather as meaſured by Fahrenheit's Thermometer.

2ndly. To record the variations in the weight and moiſture of the air, by the Barometer and Hydrometer.

3dly, To record the ſtate of the winds.

4thly. To meaſure exactly the the quantity of water that falls in our city. Theſe obſervations will be more uſeful, if we can obtain from the ſextons of the different churches in the city, ſuch a return of the deaths, as will enable us to aſcertain the increaſe or decreaſe of mortal diſeaſes by the bills of mortality. To render theſe bills more uſeful, let the ſexton be directed, in every caſe of death, to apply to the phyſician who has attended the patient for the name of the mortal diſtemper.

Let the obſervations on each of theſe ſubjects, be delivered every month to the College.

To obtain an accurate knowledge of the epidemics of the city, I would recommend the preſer-

preſervation of the accounts of the diſeaſes that are kept in the *Diſpenſary*. If theſe diſeaſes be recorded by the names that are given to them by Dr. Cullen, in the laſt edition of his Noſologia Methodica, the account of them cannot fail of being highly uſeful and beneficial to the public.* To derive the utmoſt poſſible advantage from this hiſtory of our epidemics, let us endeavour to procure ſimilar obſervations from different parts of the ſtate, and from every ſtate in the union.

To render our city as celebrated for medical advantages, as it has long been for other things, it will be neceſſary to erect in it *warm* and *cold baths*. The advantages of both theſe remedies in a country where the diſeaſes from heat and cold are ſo predominant, need not be mentioned.

A MEDICAL Library†, will help to diffuſe knowledge among us upon eaſy terms, while a botanical garden will furniſh us with an opportunity of cultivating that part of the Materia Medica, which is derived from the vegetable kingdom.

SHOULD

* The Tables, with which this volume commences, will ſhew that this propoſal has been fully adopted.

† It has been eſtabliſhed by the College, and now conſiſts of a number of ſcarce and valuable books.

SHOULD an application be made to the legiſlature, there can be no doubt of our obtaining a ſuitable piece of ground for that purpoſe.

THUS, Mr. Preſident and Gentlemen, have I pointed out in a few words, the great objects and advantages of our College of Phyſicians.

I SHALL conclude with the following remarks. It is a general opinion that the condition of man in our world is mending. The conveniences and pleaſures of life, are daily multiplying by the inventions of philoſophy. Many diſorders, once deemed incurable, now yield to medicine. No wonder then that a general expectation prevails—that a revolution is ſoon to take place in favour of human happineſs. Natural means appear to be the inſtruments deſigned by heaven to fulfil its purpoſes of mercy and benevolence to mankind. I am fully perſuaded there does not exiſt a diſeaſe in nature, that has not an antidote to it. And when I conſider the influence of liberty and republican forms of government upon ſcience, and the vigour which the American mind has acquired by the events of the late revolution, I am led to hope that a great portion of the honor and happineſs of diſcovering and applying theſe antidotes may be reſerved for the phyſicians of America.

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MEDICAL

TRANSACTIONS.

To the PRESIDENT *and* COLLEGE *of* PHYSICIANS *of* PHILADELPHIA.

WE, the Committee appointed to deliver in a return of the Diſeaſes of the Patients of the Philadelphia Diſpenſary, have agreed on the following report, which includes all the Caſes admitted from December 12, 1786, to December 1, 1787.

WE have, for the ſake of conciſeneſs, endeavoured to arrange the Diſeaſes under the generic Names of Doctor CULLEN; but the difficulty, and, in many inſtances, the impoſſibility of adhering to this plan have often obliged us to deviate from it.

WE hope that theſe, with ſimilar Communications from our Fellow-Members, will enable the College to form a juſt and accurate Eſtimate of the Diſeaſes of the City, and would wiſh that ſome plan might be adopted to carry this Deſign into Execution.

SAMUEL P. GRIFFITTS,
J. MORRIS,
JOHN R. B. RODGERS,
CASPAR WISTAR, Jun.
WILLIAM CLARKSON,
MICHAEL LEIB.

PHILADELPHIA DISPENSARY,
December 4, 1787.

PATIENTS ADMITTED.													Cured.	Dead.	Relieved.	Discharged disorderly.	Rem. to the H. and H. of E.	Remaining under care.
DISEASES.	1786, Dec.	1787 Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.						
Abortus	-	-	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-	-
Abſceſſus	3	-	-	-	1	-	-	1	-	-	-	-	3	1	1	-	-	-
Albugo	-	1	-	-	1	-	-	-	-	-	-	-	1	-	1	-	-	-
Amenorrhœa	-	-	-	-	-	1	1	2	2	1	-	-	6	-	1	-	-	-
Anaſarca	-	2	-	2	1	-	1	2	1	-	-	1	5	2	2	-	-	1
Anchyloſis	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-
Apoplexia	-	-	-	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-
Aphtha	-	-	1	1	-	-	-	1	-	1	-	-	3	1	-	-	-	-
Aſcites	2	2	-	-	1	-	1	1	-	3	3	-	2	6	-	1	-	4
Aſphyxia	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	-
Aſthma	-	-	-	1	-	7	-	1	2	1	1	1	4	1	9	-	-	-
Atrophia	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	-
Cancer	-	-	-	-	1	-	-	-	1	-	-	-	1	-	-	-	-	1
Caries	-	-	-	-	-	2	-	1	-	-	-	1	2	-	-	1	-	1
Cataractus	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-
Catarrhus	1	3	6	2	7	2	7	2	4	1	3	13	39	-	3	-	-	9
Cephalalgia	-	-	-	1	-	1	-	-	-	-	-	-	2	-	-	-	-	-
Chloroſis	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-
Carried forward,	6	9	7	7	13	14	11	12	10	8	7	16	71	13	19	2		16

PATIENTS ADMITTED.													Cured.	Dead.	Relieved.	Discharged disorderly.	Rem. to the Hof. & H. of E.	Remaining under care.
DISEASES.	1786 Dec.	1787 Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept	Oct.	Nov.						
Brought forward,	6	9	7	7	13	14	11	12	10	8	7	16	71	13	19	2	-	16
Cholera	-	-	1	-	3	1	2	6	3	-	1	-	17	-	-	-	-	-
Cholera Infantum	-	-	-	-	-	-	2	26	21	6	4	-	53	6	-	-	-	-
Colica	-	4	3	2	2	2	2	4	3	2	3	3	29	1	-	-	-	-
Conſtipatio	-	1	1	3	2	-	1	1	1	-	-	3	12	-	-	-	-	1
Contuſio	2	1	4	5	3	3	2	7	3	1	2	3	34	-	-	1	1	-
Convulſio	1	-	-	1	-	2	-	-	-	1	1	1	7	-	-	-	-	-
Cynancheparotidea	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-
tonſillaris	2	1	-	2	-	-	-	2	-	-	2	2	11	-	-	-	-	-
trachealis	-	1	-	-	1	-	-	-	-	1	1	-	4	-	-	-	-	-
Diarrhœa	-	-	-	2	7	5	11	19	10	9	2	2	61	2	4	-	-	-
Dyſenteria	-	1	-	3	2	1	3	4	5	7	5	3	31	1	1	-	-	1
Dyſpepſia	-	1	-	3	6	8	4	4	1	5	1	4	29	-	5	-	-	3
Dyſuria	-	-	-	1	-	-	1	-	-	-	-	-	2	-	-	-	-	-
Epilepſia	-	-	2	2	-	2	1	1	-	1	-	-	2	-	2	2	2	1
Epiſtaxis	-	-	1	1	-	-	-	-	-	-	1	-	3	-	-	-	-	-
Eryſipelas	-	-	-	-	-	-	1	-	-	-	1	-	1	-	-	1	-	-
Eruptiones	-	-	1	3	1	1	1	3	-	2	5	3	18	-	-	-	-	2
Carried forward,	11	19	20	35	40	39	42	89	57	43	37	40	386	23	31	6	3	24

PATIENTS ADMITTED.													Cured.	Dead.	Relieved.	Discharged disorderly.	Rem. to the Hos and H. of E.	Remaining under care.
DISEASES.	1786 Dec.	1787 Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.						
Brought forward,	11	19	20	35	40	39	42	89	57	43	37	40	385	23	31	6	3	24
Febris remittens	-	-	2	-	1	-	1	7	8	10	3	3	33	2	-	-	-	-
quotidiana	-	-	-	-	3	-	3	2	1	34	14	2	57	-	-	1	-	1
tertiana	1	-	1	1	5	-	8	7	4	6	3	3	37	-	-	-	-	2
quartana	-	1	-	2	-	-	-	-	-	1	-	-	4	-	-	-	-	-
verminosa	1	-	-	-	-	1	-	-	-	-	-	-	2	-	-	-	-	-
puerpera	-	-	-	-	-	2	-	1	1	-	-	-	3	1	-	-	-	-
Fistula in perinæo	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-
Fractura	1	-	1	-	-	1	1	1	-	2	-	1	8	-	-	-	-	-
Gangrena	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-
Gastritis	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	-
Gonorrhœa virulent	1	3	1	1	2	4	-	5	6	3	5	6	25	-	2	1	1	8
benigna	-	-	-	-	-	1	-	-	-	-	1	-	2	-	-	-	-	-
Haematemesis	-	1	-	-	-	1	-	-	-	-	1	-	3	-	-	-	-	-
Haemoptœ	-	1	-	-	-	-	-	1	-	2	1	-	5	-	-	-	-	-
Haemorrhois	-	-	-	-	-	-	-	-	1	3	-	1	4	-	-	-	-	1
Hemiplegia	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Hepatitis	-	-	1	2	1	-	-	-	1	2	1	1	8	-	1	-	-	-
Carried forward,	15	26	27	41	52	49	56	113	79	106	66	58	578	27	34	8	4	37

PATIENTS ADMITTED.													Cured.	Dead.	Relieved.	Discharged disorderly.	Rem. to the Hos. and H. of E.	Remaining under care.
DISEASES.	1786 Dec.	1787 Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.						
Brought forward,	15	26	27	41	52	49	56	113	79	106	66	58	578	27	34	8	4	37
Hernia inguinalis	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	
Herpes	-	1	4	1	2	2	1	3	1	2	1	4	19	-	-	-	-	3
Hydarthrus	-	-	1	-	1	-	1	-	-	-	-	-	-	-	1	1	-	1
Hydrocep. internus	-	-	-	-	-	-	-	-	-	1	1	-	2	-	-	-	-	
Hypochondriasis	-	-	-	-	-	1	1	-	-	-	-	-	2	-	-	-	-	
Hysteria	1	7	4	5	-	2	7	4	7	3	1	2	21	-	18	-	-	4
Icterus	-	-	-	-	1	-	-	-	-	-	-	1	1	-	-	-	-	1
Insitio variolarum	-	-	2	17	56	10	2	-	-	1	10	3	100	-	-	-	-	1
Ischias	-	-	-	-	-	-	-	-	1	-	-	1	2	-	-	-	-	
Leucorrhoea	1	-	1	1	-	1	1	1	-	-	1	-	3	-	4	-	-	
Luxatio	-	-	-	-	-	1	1	-	-	1	-	-	2	-	1	-	-	
Mania	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	
Menorrhagia	-	-	-	-	1	-	1	-	-	-	-	1	2	-	1	-	-	
Nephritis	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	
Odontalgia	-	-	-	-	-	1	1	-	-	-	-	2	4	-	-	-	-	
Ophthalmia	-	2	-	3	3	9	1	6	2	7	4	7	38	-	2	1	-	3
Palpitatio	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Carried forward,	17	38	39	70	116	76	74	127	90	121	84	79	774	27	64	10	4	51

PATIENTS ADMITTED.

DISEASES.	1786 Dec.	1787 Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Discharged disorderly.	Rem. to the Hos and H. of E.	Remaining under care.
Brought forward,	17	38	39	70	116	76	74	127	90	121	84	79	774	27	64	10	4	51
Paralysis	-	1	1	-	1		1	1	-	-	1	-	3	1	2	-	-	-
Paronychia	-	-	1	-	-		1	-	1	-	1	-	4	-	-	-	-	-
Parturitio	-	1	-	1	1	5	-	3	3	2	1	1	17	-	-	-	-	1
Peripneumon. noth	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-
Phimosis	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-
Phlogosis	1	1	-	1	1	-	-	-	1	-	1	1	7	-	-	-	-	-
Phrenitis	-	-	1	-	1	-	-	-	-	-	-	-	2	-	-	-	-	-
Phthisis-pulmon.	2	1	5	5	1	3	2	1	-	-	1	4	4	12	5	-	-	4
Pneumonia	2	9	6	6	20	2	9	5	2	6	9	4	73	5	1	-	-	1
Podagra	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-
Prolapsus uteri	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-
Psora	-	1	-	2	-	-	1	2	-	5	1	-	12	-	-	-	-	-
Rachitis	-	-	-	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-
Rheumatismus	1	7	7	9	10	7	16	14	25	3	6	7	74	1	30	-	-	7
Scarlatina anginosa	-	-	-	-	-	1	4	-	-	3	4	-	11	1	-	-	-	-
Scrophula	-	-	1	2	1	-	1	-	2	5	1	2	10	1	2	-	-	2
Spasmi	-	-	-	-	-	-	3	-	-	1	-	1	5	-	-	-	-	-
Carried over,	24	59	61	97	152	94	113	153	125	146	110	100	998	50	106	10	4	66

PATIENTS ADMITTED.

DISEASES.	1786 Dec.	1787 Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Discharged disorderly.	Removed to Hospitals and H. of E.	Remaining under care.
Brought forward,	24	59	61	97	152	94	113	153	125	146	110	100	998	50	106	10	4	66
Sphacelus	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	1
Staphyloma	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-
Synocha	-	1	3	1	3	5	-	-	-	-	-	-	13	-	-	-	-	-
Synochus	-	-	-	-	-	2	6	-	-	-	1	3	12	-	-	-	-	-
Syphilis	3	6	2	9	6	9	8	16	13	7	10	5	66	1	8	5	-	14
Tinea capitis	1	-	3	-	4	3	1	-	1	2	-	1	14	-	-	2	-	-
Tumores	-	1	-	1	2	3	1	1	-	-	1	2	8	-	1	1	-	2
Tympanites	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-
Typhus	-	1	-	1	-	-	1	-	3	8	3	1	10	6	-	1	-	1
Varicella	-	-	1	-	1	1	-	-	-	-	-	-	3	-	-	-	-	-
Variola	2	10	1	3	4	6	11	10	-	6	4	6	52	9	-	-	-	2
Vermes	2	3	5	4	1	3	4	4	3	4	5	4	39	-	-	-	-	3
Vertigo	-	-	-	1	1	-	1	-	-	-	-	-	3	-	-	-	-	-
Ulcus	2	6	2	12	8	7	10	12	8	12	13	10	50	2	15	5	2	28
Ustio	-	2	3	1	2	-	1	1	2	1	2	1	14	-	-	-	-	2
Vulnus	-	2	1	1	-	1	2	1	4	-	3	1	15	-	-	-	-	1
Total,	35	91	82	131	185	134	159	198	159	187	152	135	1297	69	131	24	6	120

PATIENTS ADMITTED.													Cured.	Dead.	Relieved	Discharged Disorderly.	Removed to the Hospital.	Remaining
DISEASES.	1787 Dec.	1788 Jan.	Feb.	Mar.	April	May	June	July	Aug,	Sept.	Oct.	Nov.						
Abortus	-	1	1	-	-	1	-	-	1	-	-	1	4	-	-	-	-	1
Abſceſſus	3	1	1	1	-	-	-	-	3	-	2	-	11	-	-	-	-	-
Amenorrhœa	1	-	-	-	-	1	2	-	-	-	-	1	4	-	-	1	-	-
Anaſarca	1	1	-	-	1	2	-	-	-	1	1	-	4	3	-	-	-	-
Anchyloſis	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-
Apoplexia	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-
Aphtha	-	1	-	-	-	-	-	-	-	-	1	-	2	-	-	-	-	-
Aſcites	1	-	-	-	-	-	1	1	1	-	-	-	1	3	-	-	-	-
Aſphyxia	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	-
Aſthma	1	1	1	1	3	2	1	5	2	1	2	-	8	1	10	1	-	-
Atrophia	-	1	-	1	-	-	-	-	-	-	-	-	1	1	-	-	-	-
Cancer	-	-	-	1	-	-	-	-	-	1	-	-	-	1	-	-	1	-
Caries	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	-
Catarrhus	9	7	9	11	6	1	2	1	1	-	2	10	51	3	2	-	-	3
Cholera	-	-	-	-	-	2	4	3	3	1	1	-	13	1	-	-	-	-
Cholera-infantum	1	-	-	-	1	-	7	33	16	7	3	-	57	9	1	-	-	-
Cephalalgia	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-
Colica	7	4	2	5	6	3	6	9	2	4	3	2	52	1	-	-	-	-
	24	17	15	20	19	12	24	53	29	15	15	14	211	24	14	2	1	4

PATIENTS ADMITTED.													Cured.	Dead.	Relieved.	Discharged disorderly.	Rem. to the H. and H. of E.	Remaining under care.
DISEASES.	1787 Dec.	1788 Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept	Oct.	Nov.						
Brought forward	24	17	15	20	19	12	24	53	29	15	15	14	211	24	14	2	1	4
Contuſio	3	11	2	3	7	3	7	3	2	1	2	3	43	-	-	-	-	4
Convulſio	-	-	-	2	-	-	1	-	-	-	-	-	1	2	-	-	-	
Cynanche Tonſillaris	1	2	3	-	3	-	-	-	-	-	-	-	9	-	-	-	-	
Cynanche Maligna	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	
Cynanche Parotidea	-	-	-	1	1	-	-	4	-	-	-	1	6	-	-	-	-	1
Cynanche Trachealis	-	2	-	-	-	1	-	-	1	-	-	-	3	1	-	-	-	
Diarrhœa	4	2	1	5	3	3	3	8	15	8	7	4	49	8	4	-	-	2
Dyſenteria	-	-	-	1	1	-	-	2	3	1	3	1	12	-	-	-	-	
Dyſpepſia	5	2	4	5	4	11	16	9	10	6	5	2	73	-	3	-	-	3
Dyſpnœa	-	-	1	-	3	-	-	-	-	-	-	-	4	-	-	-	-	
Dyſuria	-	-	-	1	1	-	-	-	-	-	-	-	2	-	-	-	-	
Enureſis	-	-	1	1	-	-	-	-	-	-	-	1	1	-	1	-	-	1
Epilepſia	-	3	-	1	1	1	1	1	-	-	-	1	1	-	3	1	-	4
Epiſtaxis	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	
Eryſipelas	1	2	-	-	-	-	-	1	-	1	2	4	8	-	-	-	-	3
Eruptiones	2	1	-	2	3	2	1	-	-	-	-	3	11	-	-	-	-	3
Febris-Remittens	1	1	-	1	-	-	4	4	3	3	1	1	17	2	-	-	-	
Carried forward	41	44	27	43	45	34	57	85	63	35	35	35	452	38	25	3	1	25

PATIENTS ADMITTED.

DISEASES.	1787 Dec.	1788 Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Discharged disorderly	Rem. to the H. and H. of F.	Remaining under care.
Brought forward	41	44	27	43	45	34	57	85	63	35	35	35	452	38	25	3	1	25
Febris Quotidiana	1	2	1	-	1	1	1	2	4	-	3	9	25	-	-	-	-	-
Febris Tertiana	6	1	-	1	2	3	2	5	2	7	6	2	35	-	-	1	-	1
Febris Quartana	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-
Febris Synocha	1	-	-	-	-	-	-	-	-	1	-	-	2	-	-	-	-	-
Febris Synochus	1	-	1	1	-	-	-	-	-	-	-	-	2	1	-	-	-	-
Febris Typhus	1	-	-	1	1	1	1	-	1	5	2	4	10	5	-	2	-	-
Febris Hectica	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-
Febris Puerpera	-	-	-	2	-	-	-	-	1	-	-	1	4	-	-	-	-	-
Fractura	-	-	-	-	-	3	1	-	-	-	-	2	4	-	-	-	-	2
Gonorrhœa	1	1	4	3	3	1	6	1	5	5	2	1	32	-	-	-	-	1
Hæmatemesis	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-
Hæmoptoe	1	-	1	1	-	1	-	-	-	-	-	-	3	-	-	-	-	-
Hæmorrhois	1	1	-	-	-	-	1	-	-	-	-	1	3	-	-	-	-	1
Hemiplegia	-	-	-	1	-	-	-	1	-	-	-	-	-	1	1	-	-	-
Hepatitis	-	1	-	-	-	3	1	-	-	-	-	1	6	-	-	-	-	-
Herpes	3	3	-	2	3	-	3	3	2	-	1	1	18	-	1	-	-	2
Hæmaturia	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-
Brought forward,	57	53	34	56	57	47	73	97	78	53	49	57	588	46	28	6	1	32

PATIENTS ADMITTED.													Cured.	Dead.	Relieved.	Discharged diſorderly.	Rem. to the H. and H. of E.	Remaining under care.
DISEASES.	1787 Dec.	1788 Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.						
Brought forward,	57	53	34	56	57	47	73	97	78	53	49	57	588	46	28	6	1	32
Hernia	-	-	-	-	-	1	1	-	-	-	1	1	1	-	-	-	-	3
Hydarthrus	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-
Hydroceph. intern.	-	-	-	1	-	-	-	-	-	-	-	1	-	1	-	-	-	1
Hydroceph. extern.	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1
Hypochondriaſis	2	-	-	-	-	2	1	-	-	-	-	-	2	-	3	-	-	-
Hyſteria	1	3	6	2	8	5	7	12	6	3	3	-	44	-	10	-	-	2
Icterus	2	-	-	-	-	1	-	-	-	-	1	4	6	-	-	-	-	2
Inſitio variolar.	5	2	-	11	32	21	-	-	-	-	-	5	75	-	-	-	-	1
Iſchias	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-
Iſchuria	-	3	1	-	1	-	-	-	-	-	-	-	3	-	2	-	-	-
Leucorrhœa	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	1	-
Mania	-	-	-	-	1	-	-	-	-	-	2	-	-	-	-	-	1	2
Melæna	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	-
Menorrhagia	1	-	-	-	1	-	-	-	1	1	-	-	4	-	-	-	-	-
Nephritis	1	-	-	-	2	-	-	1	1	1	-	-	4	1	1	-	-	-
Obſtipatio	1	1	2	2	-	1	-	1	1	-	-	-	9	-	-	-	-	-
Odontalgia	1	-	-	-	1	1	-	-	-	-	-	1	2	-	-	1	-	1
Carried forward,	73	62	43	72	103	80	83	111	87	58	56	70	741	48	45	7	2	45

PATIENTS ADMITTED.

DISEASES.	1787 Dec.	1788 Jan	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Discharged disorderly.	Rem. to the H. and H. of E.	Remaining under care.
Brought forward,	73	62	43	72	103	80	83	111	87	58	56	70	741	48	45	7	2	45
Ophthalmia	2	-	6	3	1	7	-	5	-	2	-	1	24	-	-	2	-	1
Otalgia	-	-	-	-	-	2	-	-	-	-	-	-	2	-	-	-	-	-
Palpitatio	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-
Paralysis	-	-	2	-	1	-	-	-	-	-	-	-	2	-	-	-	-	1
Paronychia	-	-	-	-	-	-	-	2	-	-	-	-	2	-	-	-	-	-
Parturitio	1	1	2	-	-	-	-	3	2	-	1	1	10	-	-	-	-	1
Peripneum. Notha.	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-
Phlogosis	1	-	-	-	-	1	-	-	-	-	-	-	2	-	-	-	-	-
Pertussis	-	2	2	-	-	-	-	-	4	-	-	4	9	1	-	-	-	2
Phthisis Pulmon.	5	2	3	2	5	1	2	1	2	2	1	3	2	15	3	1	1	7
Physconia	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-
Phymosis	-	-	-	2	-	-	1	-	-	-	-	-	3	-	-	-	-	-
Paraphymosis	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-
Pneumonia	8	21	13	12	10	7	7	1	1	2	1	3	77	5	-	1	-	3
Podagra	-	-	-	-	-	1	-	-	-	-	-	1	-	-	1	-	-	1
Polypus	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-
Prolapsus Uteri	-	-	-	-	-	1	1	-	-	-	-	1	1	-	-	-	-	2
Carried forward,	90	88	71	93	121	101	95	123	96	64	59	84	876	69	52	12	3	63

PATIENTS ADMITTED.

DISEASES.	1787 Dec.	1788 Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Discharged disorderly.	Rem. to the H. and H. of E.	Remaining under care.
Brought forward,	90	88	71	93	121	101	95	123	96	64	59	84	876	69	52	12	3	63
Pſora	2	4	1	1	3	9	6	-	1	6	-	2	35	-	-	-	-	-
Pyroſis	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	-
Raphania	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-
Rheumatiſmus	4	8	10	13	11	10	11	11	6	15	6	4	78	-	17	3	3	8
Sarcocele	-	1	-	-	-	1	-	-	1	-	-	-	1	-	-	-	-	2
Scarlatina anginoſa	2	-	-	-	1	-	-	1	-	-	-	-	4	-	-	-	-	-
Scrophula	-	-	-	1	-	1	-	1	1	2	-	2	4	-	1	-	-	3
Spaſmi	1	-	-	-	-	-	-	-	-	-	1	-	2	-	-	-	-	-
Sphacelus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Staphyloma	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-
Surditas	-	-	-	-	1	-	-	-	-	1	-	-	-	-	1	-	-	1
Syncope	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	-
Syphilis	6	6	6	7	3	20	11	11	7	13	14	7	79	1	4	10	5	12
Tinea Capitis	-	6	1	1	-	1	1	-	2	-	-	-	10	-	1	-	-	1
Triſmus	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	-
Tumores	1	1	2	-	1	-	1	-	1	1	-	-	6	-	2	-	-	-
Variola	16	7	6	5	6	9	9	8	5	-	-	2	62	11	-	-	-	-
Carried forward,	120	121	98	121	148	152	137	155	120	102	80	101	1162	81	78	25	11	90

PATIENTS ADMITTED.													Cured.	Dead.	Relieved.	Discharged disorderly.	Rem. to the H. and H. of E.	Remaining under care.
DISEASES.	1787 Dec.	1788 Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.						
Brought forward,	120	121	98	121	148	152	137	155	120	102	80	101	1162	81	78	25	11	90
Varicella	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-
Vermes	3	1	3	1	-	3	4	2	-	8	2	1	27	-	-	-	-	1
Ulcus	8	13	4	6	9	6	4	8	10	7	2	6	69	-	5	2	2	5
Uſtio	-	-	-	1	1	1	-	2	-	1	-	-	6	-	-	-	-	-
Vulnus	2	2	2	2	-	2	-	2	4	1	2	2	20	-	-	-	-	1
Total	133	137	107	131	159	164	145	169	134	119	86	110	1285	81	83	27	11	97

PATIENTS ADMITTED.

DISEASES.	From laſtyr.	Dec.	Jan. 1797	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Total.	Cured.	Dead.	Relieved.	Incurable.	Diſcharged diſorderly.	Rem to the Hoſs and H. of E.	Remaining under care.
Abſceſſus	-	2	-	-	-	1	2	-	1	-	1	-	-	7	7	-	-	-	-	-	-
Albugo	-	-	-	-	-	-	1	-	-	-	-	-	-	1	1	-	-	-	-	-	-
Amenorrhœa	1	-	2	2	1	2	2	2	5	-	2	1	-	20	17	-	1	-	1	1	-
Amauroſis	-	-	-	-	1	-	-	-	-	-	-	-	-	1	1	-	1	-	-	-	-
Anaſarca	-	-	1	-	-	1	-	3	-	-	1	1	-	7	4	1	1	-	-	-	-
Anchyloſis	-	-	-	-	-	-	-	-	1	-	-	-	-	1	1	-	1	-	-	-	-
Anthrax	-	-	1	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	1
Apoplexia	-	-	1	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-
Aphtha	-	-	1	1	-	-	1	1	-	-	-	-	1	5	4	1	-	-	-	-	1
Aſcites	-	1	1	-	1	-	-	-	-	-	-	-	-	3	1	1	-	-	-	-	1
Aſthma	-	-	1	1	1	1	-	-	-	2	1	-	-	7	4	-	3	-	-	-	-
Atrophia	-	-	1	-	1	-	-	-	-	-	1	1	-	4	2	2	-	-	-	-	-
Cance	-	1	-	-	-	-	-	1	-	-	-	-	1	3	-	-	1	-	-	-	2
Calculus Veſicæ	-	-	-	1	-	-	-	-	-	1	-	-	-	2	1	-	1	-	-	-	-
Cataractus	-	-	-	-	-	-	-	1	-		-	-	-	1	-	-	-	-	-	-	-
Catarrhus	2	4	4	2	1	9	5	2	1	1	4	24	2	65	65	-	-	-	-	-	-
Cephalalgia	-	-	-	-	-	-	2	-	-		1	-	-	3	3	-	-	-	-	-	-
Cholera	1	-	-	-	1	-	1	1	8	9	1	-	-	22	20	2	-	-	-	-	-
Carried forward,	4	8	13	7	7	14	14	11	16	13	12	27	4	154	130	7	9		1	1	6

PATIENTS ADMITTED.

DISEASES.	From last yr	Dec.	Jan. 1788	1789 Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Total.	Cured.	Dead.	Relieved.	Incurable.	Discharged disorderly.	Rem to the Hos and H. of E.	Remaining under care.
Brought forward	4	8	13	7	7	14	14	11	16	13	12	27	4	154	130	7	9	-	1	1	6
Cholera Infantum	-	-	-	1	-	2	1	5	33	21	3	1	-	67	59	8	-	-	-	-	-
Colica	-	3	3	3	2	6	6	4	-	2	3	4	5	41	41	-	-	-	-	-	-
Conſtipatio	-	-	-	3	1	2	-	2	-	3	1	2	2	16	16	-	-	-	-	-	-
Contuſio	3	6	9	7	2	1	4	3	2	2	4	4	6	53	52	-	-	-	-	-	1
Convulſio	-	1	-	-	-	1	1	1	-	1	-	-	-	5	4	1	-	-	-	-	-
Cynanche parotid.	1	-	-	1	1	-	1	1	-	-	-	-	-	5	5	-	-	-	-	-	-
tonſillaris	-	-	-	1	-	-	-	-	-	-	1	1	1	4	4	-	-	-	-	-	-
trachealis	-	-	-	-	-	2	-	1	-	1	1	-	-	5	1	4	-	-	-	-	-
Diarrhœa	1	3	4	4	4	3	2	9	11	7	5	7	6	66	55	10	-	-	-	-	1
Dyſenteria	-	1	1	-	3	-	-	1	13	19	16	9	1	64	57	5	-	-	1	1	-
Dyſpepſia	3	2	4	3	4	7	7	14	12	14	8	4	6	88	83	-	3	-	1	-	1
Dyſphagia	-	-	-	-	-	-	-	-	1	-	-	-	1	2	2	-	-	-	-	-	-
Dyſuria	-	-	2	-	-	-	-	-	-	-	1	-	-	3	3	-	-	-	-	-	-
Epilepſia	2	2	-	1	1	-	-	5	1	1	-	1	1	15	3	-	8	-	-	-	4
Epiſtaxis	-	-	-	-	-	-	-	-	-	-	1	-	-	1	1	-	-	-	-	-	-
Eryſipelas	3	-	-	-	-	1	1	-	-	1	-	-	1	7	6	-	-	-	-	-	1
Eruptiones	-	6	1	2	1	1	2	1	2	2	5	-	2	25	25	-	-	-	-	-	
Carried forward,	17	32	37	33	26	40	39	58	91	87	61	60	36	621	547	35	20		3	2	14

PATIENTS ADMITTED.														Total.	Cured.	Dead.	Relieved.	Incurable.	Discharged disorderly.	Rem. to the Hos and H. of E.	Remaining under care.
DISEASES.	From last yr.	Dec.	Jan. 1789	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.								
Brought forward,	27	32	37	33	26	40	39	58	91	87	61	60	36	621	547	35	20	-	3	2	14
Febris-Remittens	-	-	-	-	1	-	1	2	4	4	7	-	1	20	17	1	-	-	1	1	-
quotidiana	-	3	1	3	-	1	5	3	2	2	2	4	2	28	25	-	-	-	-	-	3
tertiana	2	-	5	2	1	5	5	3	5	3	2	5	-	38	38	-	-	-	-	-	-
quartana	-	-	-	-	-	-	-	-	-	-	1	-	-	1	1	-	-	-	-	-	-
puerpera	-	1	-	-	1	-	2	-	-	-	1	-	-	5	3	2	-	-	-	-	-
Fractura	-	-	2	1	2	-	1	3	1	1	1	-	-	12	12	-	-	-	-	-	-
Gonorrhœa virul.	-	1	3	2	-	-	1	2	7	1	3	-	1	21	19	-	-	-	1	-	1
Hæmatemesis	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1	-	-	-	-	-	-
Hæmoptoe	-	-	-	-	1	-	-	-	1	-	-	-	-	2	2	-	-	-	-	-	-
Hæmorrhois	-	-	1	-	-	-	2	-	1	-	1	-	-	5	5	-	-	-	-	-	-
Hemiplégia	-	1	-	-	-	-	-	2	-	-	-	1	1	5	1	1	2	-	-	-	1
Hepatitis	-	1	1	-	-	-	2	-	-	1	-	1	-	6	4	2	-	-	-	-	-
Hernia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Herpes	1	-	2	2	1	1	1	3	1	2	-	2	5	21	15	-	2	-	-	-	4
Hydarthrus	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-	1
Hydrocep. acutus	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	1	-	-	-	-	-
Carried forward,	30	39	52	43	33	47	59	76	114	102	79	74	46	788	690	42	24	-	5	3	24

PATIENTS ADMITTED.														Total.	Cured.	Dead.	Relieved.	Incurable.	Discharged Diſorderly.	Removed to the Hoſpital.	Remaining under care.
DISEASES.	From laſtyr.	Dec.	Jan. 1789	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.								
Brought forward,	30	39	52	43	33	47	59	76	114	102	79	74	46	788	690	42	24	-	5	3	24
Hydrocep. chron.	-	-	1	-	1	-	-	-	-	-	-	-	-	2	-	-	-	2	-	-	-
Hydrothorax	-	-	-	1	-	-	-	1	1	1	-	-	-	4	1	1	1	-	-	1	-
Hydrocele	-	-	-	-	-	-	-	-	-	-	2	-	-	2	-	-	-	-	1	-	1
Hypochondriaſis	-	-	1	-	-	-	-	1	1	-	-	-	-	3	1	-	1	-	1	-	-
Hyſteria	1	3	5	3	7	2	5	4	4	5	4	2	2	47	32	-	10	-	1	-	4
Icterus	2	1	2	-	1	-	-	-	-	-	-	-	-	6	6	-	-	-	-	-	-
Inſitio Variolar.	1	-	-	-	-	-	-	-	-	-	-	1	-	2	1	1	-	-	-	-	-
Iſchuria	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1	-	-	-	-	-	-
Leucorrhœa	-	-	1	-	-	-	1	1	1	1	-	1	-	6	5	-	-	-	-	-	1
Luxatio	-	-	-	1	-	-	-	-	-	-	-	1	-	2	2	-	-	-	-	-	-
Mania	2	-	-	-	-	-	1	1	1	1	-	1	-	7	4	1	1	-	-	1	-
Melæna	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1	-	-	-	-	-	-
Menorrhagia	-	1	3	1	1	-	3	1	2	-	1	-	-	13	13	-	-	-	-	-	-
Nephritis	-	1	-	-	2	-	-	2	-	-	1	1	1	8	3	-	2	-	2	-	1
Odontalgia	-	-	-	1	-	-	-	-	-	-	-	-	1	2	2	-	-	-	-	-	-
Otalgia	-	-	-	-	-	-	1	-	-	-	-	-	-	1	1	-	-	-	-	-	-
Ophthalmia	1	2	1	1	4	1	3	7	7	7	7	7	-	48	43	-	-	-	1	-	4
Carried forward,	37	47	66	51	49	50	73	94	131	118	94	89	50	943	806	45	39	2	11	5	35

PATIENTS ADMITTED.														Total.	Cured.	Dead.	Relieved.	Incurable.	Discharged diſorderly.	Rem. to the H. and H. of E.	Remaining under care.
DISEASES.	From laſtyr.	Dec.	1788 Jan.	1789 Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.								
Brought forward,	37	47	66	51	49	50	73	94	131	118	94	89	50	943	806	45	39	2	11	5	35
Paralyſis		2	-	-	-	-	1	-	-	-	-	1	-	4	2	-	1	-	-	-	1
Paronychia	-	-	-	-	-	1	-	-	-	2	1	-	-	4	4	-	-	-	-	-	-
Parturitio	-	2	1	2	2	-	2	1	-	2	-	2	3	17	17	-	-	-	-	-	-
Pertuſſis	2	1	5	1	1	8	1	3	3	-	2	5	1	33	28	3	-	-	-	-	2
Phlogoſis	-	3	2	1	1	2	1	3	8	-	1	-	-	22	21	-	-	-	-	1	-
Phrenitis	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1	-	-	-	-	-	-
Phthiſis	1	3	2	-	3	5	1	4	2	1	1	2	3	28	-	15	3	-	-	1	9
Phthiſis incip.	4	-	2	-	-	4	2	1	4	4	2	-	-	23	13	-	9	-	-	1	-
Pneumonia	1	17	9	15	8	11	11	3	-	1	2	18	12	108	98	9	-	-	-	1	-
Podagra	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-
Prolapſus uteri	1	-	-	-	1	-	-	-	1	-	-	-	-	3	3	-	-	-	-	-	-
ani	-	-	-	-	1	-	-	-	1	1	-	-	-	3	3	-	-	-	-	-	-
Polypus	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	1
Pſora	2	-	5	2	1	4	4	2	1	3	3	-	13	40	37	-	-	-	-	-	3
Rubeola	-	-	-	8	43	54	36	18	1	-	3	-	-	163	159	4	-	-	-	-	-
Rheumatiſmus	4	8	5	7	15	8	10	4	11	7	7	8	5	99	72	-	21	-	-	-	6
Scarlatina Cynan.	-	3	1	-	-	-	-	-	-	2	2	2	-	10	10	-	-	-	-	-	-
Carried forward	54	86	98	87	125	147	142	133	165	141	118	128	87	1503	1274	77	73	2	11	9	57

PATIENTS ADMITTED.														Total.	Cured.	Dead.	Relieved.	Incurable.	Discharged disorderly.	Rem. to the Hos and H. of E.	Remaining under care.
DISEASES.	From last yr.	Dec. 1788	Jan. 1789	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.								
Brought forward,	54	86	98	87	125	147	142	133	165	141	118	128	87	1503	1274	77	73	2	11	9	57
Scrophula	2	-	-	1	3	-	2	1	-	-	-	2	-	11	6	-	5	-	-	-	-
Schirrhus	-	-	1	-	-	-	-	1	-	-	-	-	-	2	-	-	1	-	1	-	-
Spasmi	-	-	-	-	2	1	-	1	-	-	-	1	-	5	5	-	-	-	-	-	-
Surditas	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	1	-	-	-	-
Sphacelus	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	1	-	-	-	-	-
Synocha	-	2	-	-	-	1	2	1	-	-	1	-	-	7	7	-	-	-	-	-	-
Synochus	-	-	-	1	3	-	2	-	1	-	-	1	-	8	8	-	-	-	-	-	-
Syphilis	12	7	11	10	10	12	6	8	13	13	14	12	12	140	104	2	2	-	5	3	24
Tinea Capitis	-	-	-	-	-	1	-	1	1	1	1	1	1	7	7	-	-	-	-	-	-
Tumores	-	-	1	2	1	1	-	2	-	1	1	1	-	10	8	1	1	-	-	-	-
Tussis	-	-	-	4	1	3	9	1	1	1	2	1	4	27	25	-	-	-	-	-	2
Tympanites	-	-	-	-	-	1	-	-	-	-	-	1	-	2	1	-	-	-	-	-	1
Typhus	-	3	4	-	-	2	1	2	-	1	2	2	2	19	14	4	-	-	-	-	1
Variola	-	-	-	-	-	-	-	-	-	-	1	-	-	1	1	-	-	-	-	-	-
Vermes	1	-	8	8	2	1	-	1	5	3	2	3	7	41	38	1	-	-	-	-	2
Vertigo	-	-	-	-	-	1	-	-	-	1	-	1	-	3	3	-	-	-	-	-	-
Ulcus	7	7	6	1	6	4	1	8	6	9	8	2	3	68	44	-	11	-	3	2	8
Carried forward,	76	105	129	114	153	175	165	160	192	171	151	157	116	1756	1545	86	94	2	20	14	95

PATIENTS ADMITTED.

DISEASES.	From last yr.	Dec. 1788	Jan. 1789	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Total.	Cured.	Dead.	Relieved.	Incurable.	Discharged disorderly.	Rem. to the H. and H. of E.	Remaining under care.
Brought forward	76	105	129	114	153	175	165	160	192	171	151	157	116	1756	1545	86	94	2	20	14	95
Uſtio	-	3	2	5	2	1	1	1	2	1	1	-	-	19	18	1	-	-	-	-	-
Vomica	-	-	-	-	-	-	1	-	1	-	-	-	-	2	-	2	-	-	-	-	-
Vulnus	1	1	2	2	2	-	2	3	4	5	2	3	3	30	28	-	-	-	-	-	2
Total,	77	109	133	121	157	176	169	164	199	177	155	160	119	1807	1591	89	94	2	20	14	97

PHILADELPHIA——PATIENTS ADMITTED.

DISEASES.	R. un. c. fin la. yr.	Dec. 1789	Jan. 1790	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Disorderly.	Rem. to the H. and H. of E.	Remaining under care.	Total.
Abortus		-	-	-	-	-	-	1	-	-	-	1	-	2	-	-	-	-	-	2
Abſceſſus		-	-	-	-	1	-	-	1	2	2	-	-	5	1	-	-	-	-	6
Albugo			-	-	-	-	-	-	1	-	-	-	-	-	-	1	-	-	-	1
Amenorrhœa		1	4	5	5	2	-	-	1	1	2	2	2	22	-	-	-	-	-	25
Anaſarca		1	1	4	2	-	1	2	3	3	-	1	-	8	3	4	-	2	3	18
Anchyloſis		1	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	1	2
Aphtha		1	-	1	-	1	1	-	-	1	-	-	-	5	-	-	-	-	-	5
Aſcites	1	1	-	2	1	-	-	-	2	-	1	-	-	2	-	2	-	2	2	8
Aſthma		-	3	1	-	-	4	4	1	1	4	-	-	6	-	11	1	-	-	18
Atrophia		1	-	-	-	-	1	-	-	-	1	-	-	2	1	-	-	-	-	3
Calculus Veſicæ		1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Cancer		1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Catarrhus		2	2	6	8	8	80	21	7	2	6	4	8	149	-	2	-	-	3	154
Cephalalgia		1	-	1	1	-	-	1	-	1	-	2	1	8	-	-	-	-	-	8
Cholera		-	-	-	-	-	-	2	8	-	3	-	1	13	1	-	-	-	-	14
Cholera Infant		-	-	-	-	-	1	2	17	17	3	1	-	34	6	-	1	-	-	41
Chorea		-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	-	-	2	2
Colica		1	1	-	8	5	5	7	3	2	4	6	3	44	-	-	-	-	1	45
Carried forward,	1	12	11	20	25	17	93	42	44	30	27	17	15	300	14	21	2	4	13	354

PHILADELPHIA—PATIENTS ADMITTED.

DISEASES.	Rem. unc. fin. la. yr.	Dec. 1789	Jan. 1790	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured	Dead.	Relieved.	Disorderly.	Rem. to the H. and H. of E.	Remaining under care	Total.
Brought over,	1	12	11	20	25	17	93	42	44	30	27	17	15	300	14	21	2	4	13	354
Constipatio	-	1	-	1	1	2	2	3	2	4	-	-	-	16	-	-	-	-	-	16
Contusio	1	3	-	5	9	6	6	3	11	10	6	4	3	62	-	-	1	1	3	67
Convulsio	-	-	1	-	-	-	-	1	-	1	-	-	-	3	-	-	-	-	-	3
Cynanche Parotid	-	1	1	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	-	2
Tonsil	-	2	-	1	1	1	1	1	-	-	2	2	-	10	1	-	-	-	-	11
Tracheal	-	-	-	-	-	1	2	1	1	-	1	2	-	6	2	-	-	-	-	8
Cystitis	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Diarrhœa	1	4	1	2	2	3	5	3	15	10	11	5	4	63	2	1	-	-	-	66
Dysenteria	-	1	-	1	2	1	1	4	1	3	4	2	1	18	2	-	-	1	-	21
Dyspepsia	2	7	6	5	3	8	9	4	12	6	5	4	3	67	-	3	1	-	3	74
Dysphagia	-	-	-	1	-	1	-	-	-	-	-	-	-	1	-	-	1	-	-	2
Epilepsia	3	-	-	1	2	1	1	2	-	1	-	-	-	2	-	9	-	-	-	11
Eruptiones	-	-	2	-	2	3	6	3	3	1	1	1	3	23	-	1	-	-	1	25
Erysipelas	-	1	2	1	-	1	-	-	1	-	-	2	-	7	-	-	-	1	-	8
Febris Remittens	-	2	1	2	2	3	1	4	4	8	4	7	3	38	-	-	3	-	-	41
Quotidian	2	1	1	3	1	1	2	2	4	3	12	6	6	43	-	-	-	-	1	44
Tertiana	-	-	1	1	1	2	8	6	2	5	2	1	-	29	-	-	-	-	-	29
Carried forward	10	35	28	44	51	51	137	79	100	82	75	53	38	691	21	35	8	7	21	783

PHILADELPHIA——PATIENTS ADMITTED.

DISEASES.	R. un. la. yr.	Dec.	Jan. 1789	Feb.	Mar.	April	May	June	July	Aug.	Sept	Oct.	Nov.	Cured.	Dead.	Relieved.	Discharged disorderly.	Rem to the Hof. & H. of E.	Remaining under care.	Total.
Brought forward,	10	35	28	44	51	51	137	79	100	82	75	53	38	691	21	35	8	7	21	783
Febris Quartana	-	-	-	-	1	1	-	-	-	-	-	1	-	3	-	-	-	-	-	3
Synocha	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	-	1
Synochus	-	-	-	-	1	-	2	-	-	-	-	-	-	3	-	-	-	-	-	3
Puerpera		1	-	-	-	-	-	-	-	-	-	1	-	2	-	-	-	-	-	2
Typhus	2	1	2	-	-	-	-	-	2	4	-	1	-	7	5	-	-	-	-	12
Fiſtula in Ano	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	1
in Perinæo	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Fractura	-	1	-	1	2	2	1	1	-	3	1	2	-	11	-	1	-	-	2	14
Gaſtrodynia	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Gonorrhœa	1	4	2	-	1	1	1	2	1	6	3	3	2	24	-	-	-	-	3	27
Haemorrhagia	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	1
Haematemeſis	-	-	-	-	-	1	-	-	-	-	-	1	-	1	1	-	-	-	-	2
Menorrhagia	-	1	2	-	1	-	1	-	-	1	1	-	1	8	-	-	-	-	-	8
Hæmoptœ	-	2	1	1	-	-	2	1	1	-	1	1	1	10	1	-	-	-	-	11
Hæmorrhois	-	-	1	1	1	1	1	-	-	3	1	-	-	9	-	1	2	-	1	2	9	6
Hemiplegia	1	-	-	-	-	-	2	-	-	2	-	-	1	-	1	1	-	-	-	-	11
Hepatitis	-	1	3	1	-	-	2	-	-	2	1	1	-	9	1	1	-	-	-	-
Carried forward,	14	46	39	48	58	60	149	84	104	104	83	64	43	781	31	39	9	8	28	896

PHILADELPHIA——PATIENTS ADMITTED.

DISEASES.	Rem. fin. la. yr.	Dec. 1789	Jan. 1790	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Diſorderly.	Rem. to the Hoſ and H. of E.	Remaining under care.	Total.
Brought forward,	14	46	39	48	58	60	149	84	104	104	83	64	43	781	31	39	9	8	28	896
Hernia	-	1	-	-	-	-	-	-	-	2	-	1	-	2	-	-	1	1	-	4
Herpes	5	2	2	6	1	-	-	2	3	1	1	-	1	23	-	-	-	-	1	24
Hydarthrus	-	1	1	-	-	-	-	-	1	-	-	-	-	1	-	2	-	-	-	3
Hydroceph. acut.	-	-	-	-	-	-	-	-	1	-	-	-	1	-	2	-	-	-	-	2
Hydrothorax	-	-	1	-	1	-	-	-	1	-	-	-	-	2	1	-	-	-	-	3
Hypochondriaſis	-	2	-	-	1	-	-	-	-	-	1	-	-	2	-	1	1	-	-	4
Hyſteria	5	10	2	1	2	3	11	2	3	8	1	1	4	42	-	9	-	-	2	53
Hydrocele	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	1
Hydrops burſæ mu.	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	-	1
Icterus	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Inſitio variolar.	-	-	-	-	1	40	26	-	-	-	-	3	1	70	-	-	-	-	1	71
Iſchuria	-	-	-	-	1	1	-	-	1	-	1	-	-	4	-	-	-	-	-	4
Leucorrhœa	-	-	-	-	-	3	3	2	2	1	-	-	1	10	-	1	-	-	2	13
Mania	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Melancholia	1	-	-	-	-	-	-	-	-	-	-	2	-	-	-	1	-	-	1	2
Nephritis	1	2	1	1	1	-	1	-	-	-	-	1	-	7	-	-	-	-	1	8
Œdema Lacteum	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Carried forward,	26	64	48	56	67	107	191	91	116	116	87	72	51	947	34	54	12	9	36	1092

PHILADELPHIA——PATIENTS ADMITTED.

DISEASES.	R.un. c. fin. la. yr.	Dec. 1789	Jan. 1790	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Diiorderly.	Rem. to the H. and H. of E.	Remaining under care.	Total.
Brought forward,	26	64	48	56	54	107	191	91	116	116	87	72	51	947	34	54	12	9	36	1092
Ophthalmia	3	2	3	2	1	3	1	6	4	5	6	3	1	38	-	1	-	1	-	40
Paralyſis	1	-	2	-	2	1	1	1	1	1	-	1	-	1	-	8	-	2	-	11
Paronychia	-	-	-	-	-	-	-	1	-	-	1	-	-	2	-	-	-	-	-	2
Parturitio	-	2	3	1	-	4	2	1	4	1	2	1	-	21	-	-	-	-	-	21
Pertuſſis	3	-	1	1	4	2	2	1	-	-	1	1	-	16	-	-	-	-	-	16
Phlogoſis	-	2	3	1	1	-	2	1	-	2	1	2	1	16	-	-	-	-	-	16
Phrenitis	-	-	-	1	-	1	-	-	-	-	-	-	-	1	1	-	-	-	-	2
Phthiſis Pulmon.	9	2	4	2	2	3	1	2	-	2	1	2	1	3	9	12	1	-	6	31
Phyſconia	-	-	1	-	-	-	-	5	2	-	1	-	-	5	-	4	-	-	-	9
Pneumonia	-	11	6	11	12	13	15	3	1	-	2	7	5	72	10	-	-	-	4	86
Podagra	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Polypus	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Prolapſus Uteri	-	1	1	1	-	-	-	-	-	1	-	-	2	3	-	2	-	-	1	6
Pſora	-	1	-	-	-	1	1	5	3	1	-	3	-	14	-	-	-	-	1	15
Rheumatiſmus	8	11	9	13	9	10	9	7	7	7	6	6	2	82	-	12	1	3	6	104
Rubeola	-	-	2	1	3	7	1	-	-	-	-	-	-	14	-	-	-	-	-	14
Scarlatina	-	-	2	-	1	-	-	-	2	4	-	-	2	8	2	-	-	-	1	11
Carried forward,	50	97	85	91	89	152	226	124	140	140	108	98	65	1245	56	95	14	15	55	1478

PHILADELPHIA——PATIENTS ADMITTED.

DISEASES.	Rem. fr. la. yr.	Dec. 1789	Jan. 1790	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Disorderly.	Rem. to the Hos and H. of E.	Remaining under care.	Total.
Brought forward,	50	97	85	91	89	152	226	124	140	140	108	98	65	1245	56	95	14	15	55	1478
Schirrus	-	-	-	-	-	-	-	2	-	-	1	-	-	2	-	1	-	-	-	3
Scrophula	1	1	-	-	1	1	-	-	2	-	1	-	-	4	1	-	-	-	2	7
Sphacelus	-	-	-	2	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	2
Syncope	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Syphilis	23	5	9	9	7	5	10	13	7	15	7	6	11	106	-	2	3	3	13	127
Tetanus	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	-	1
Tinea capitis	-	1	2	-	-	-	-	-	1	1	-	1	-	6	-	-	-	-	-	6
Tumores	-	2	2	-	1	1	2	1	1	3	2	3	-	14	-	2	-	1	1	18
Tympanites	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Tuſſis	2	7	4	1	4	1	1	2	2	7	2	5	-	33	-	1	-	1	3	38
Varicella	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Variola	-	-	-	-	-	-	1	4	4	2	-	-	2	12	1	-	-	-	-	13
Vermes	3	5	8	7	3	1	10	2	2	10	7	2	2	57	2	1	1	-	1	62
Vertigo	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-	1
Vomica	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	1
Vomitus	-	-	-	-	-	-	-	-	1	-	1	-	-	2	-	-	-	-	-	2
Ulcus	12	8	5	5	2	5	4	9	10	4	3	10	5	51	-	9	3	3	16	82
Carried forward	92	126	115	116	108	166	155	157	170	182	133	126	85	1536	63	111	21	23	92	1844

DISEASES.	PATIENTS ADMITTED.													Cured.	Dead.	Relieved.	Discharged disorderly.	Rem. to the H. and H. of E.	Remaining undercare.	Total.
	R:un. c. fin. la. yr.	Dec.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct	Nov.							
Brought forward	92	126	115	116	108	166	155	157	170	182	133	126	85	1536	63	111	21	23	92	1844
Urticaria	-	-	-	-	-	-	-	1	-	-	2	-	-	3	-	-	-	-	-	3
Uftio		1	3	3	2	1	-	-	1	1	1	-	2	13	-	-	-	-	2	15
Vulnus	2	2	1	2	5	5	2	1	4	2	1	2	1	28	-	-	2	-	-	30
Total,	94	129	119	121	115	172	157	159	175	185	137	128	88	1580	63	111	23	23	94	1892

PATIENTS ADMITTED.

DISEASES.	Transfers.	Dec. 1791.	Jan. 1792.	Feb.	Mar	April	May	June	July	Aug.	Sept	Oct.	Nov.	Cured.	Dead.	Relieved.	Disorderly.	Rem. to the H. and H. of E.	Remaining under care.	Total.
Abortus	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Albugo	-	-	-	-	3	-	-	-	1	-	-	-	-	1	-	3	-	-	-	4
Abſceſſus	-	-	1	-	-	1	-	-	1	-	-	-	-	3	-	-	-	-	-	3
Amenorrhœa	3	1	1	-	-	1	-	3	-	3	1	-	1	11	-	1	1	-	1	14
Anaſarca	1	-	-	-	1	-	1	-	2	-	3	3	2	4	6	1	1	-	1	13
Anchyloſis	1	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	1	-	-	2
Anthrax	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Apoplexia	-	-	-	-	1	-	-	-	-	1	-	-	-	-	2	-	-	-	-	2
Aſcites	2	-	1	1	-	-	-	1	1	1	-	-	-	1	4	2	-	-	-	7
Aſthma	-	2	-	1	1	-	-	1	1	-	-	1	2	3	1	4	-	-	1	9
Atrophia	-	-	-	1	-	1	-	-	-	-	-	1	-	-	2	-	1	-	-	3
Calculus Veſicæ	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	1
Cance	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Caries	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-	1
Catarrhus	3	10	28	18	16	7	3	4	1	4	3	-	6	102	-	-	-	-	1	103
Cephalalgia	-	-	-	-	4	-	-	-	1	1	-	1	1	8	-	-	-	-	-	8
Cholera	-	-	-	-	-	-	-	2	6	6	2	1	-	17	-	-	-	-	-	17
Cholera-infantum	-	-	-	-	-	-	1	2	12	6	-	-	-	17	4	-	-	-	-	21
Carried forward	10	13	32	22	26	11	5	14	26	22	10	7	12	170	19	13	4		4	210

PATIENTS ADMITTED.

DISEASES.	Transfers.	Dec. 1790	Jan. 1791	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Disorderly.	Rem. to the H. and H. of E.	Remaining under care.	Total.
Brought forward	10	13	32	22	26	11	5	14	26	22	10	7	12	170	19	13	4		4	210
Chorea	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	2
Colica	-	3	1	4	2	3	2	1	3	1	1	2	3	23	2	-	1	-	-	26
Conſtipatio	-	-	3	3	5	4	1	-	3	1	-	-	1	21	-	-	-	-	-	21
Contuſio	3	4	2	2	5	2	1	4	6	3	2	3	7	40	-	1	2	-	1	44
Convulſions	-	2	1	-	-	-	1	1	1	2	-	1	-	8	-	1	-	-	-	9
Cynan. Parotid.	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Tonſillaris	-	-	-	1	1	1	1	-	-	-	-	1	1	6	-	-	-	-	-	6
Trachealis	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	1
Cyſtitis	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Dentitio	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Diarrhœa	-	1	1	3	4	6	2	4	1	2	4	5	1	27	6	-	-	1	-	34
Dyſenteria	-	-	-	-	-	-	-	1	21	27	12	5	2	63	2	-	3	-	-	68
Dyſpepſia	4	-	-	3	4	9	3	1	1	-	4	2	-	30	-	1	-	-	-	31
Dyſuria	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Enureſis	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	1
Epilepſia	-	-	-	3	1	-	-	-	-	-	1	-	1	3	-	2	-	-	1	6
Epiſtaxis	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Carried forward,	19	23	42	42	48	38	16	26	63	58	34	26	29	395	31	18	10	1	9	464

PATIENTS ADMITTED.

DISEASES.	Transfers.	Dec. 1796	Jan. 1797	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Discharged disorderly	Rem. to the H. and H. of F.	Remaining under care.	Total.
Brought forward	19	23	42	42	48	38	16	26	63	58	34	26	29	395	31	18	10	1	9	464
Erysipelas	-	-	-	1	2	-	1	-	1	-	-	1	-	6	-	-	-	-	-	6
Eruptiones	1	-	3	1	3	7	4	-	-	3	5	5	3	34	-	-	1	-	-	35
Febris remittens	-	1	-	-	-	-	1	1	-	2	7	-	-	12	-	-		-	-	12
quotidiana	1	2	1	-	4	5	2	-	3	5	5	8	6	41	-	-		1	-	42
tertiana	-	1	-	-	-	-	1	1	1	1	2	3	-	10	-	-		-	-	10
quartana	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-		-	-	1
puerpera	-	-	-	1	-	-	1	-	-	-	-	-	-	2	-	-	-	-	-	2
Fistula in ano	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	2
Fractura	2	2	-	2	1	-	-	-	-	-	-	-	2	8	1	-	-	-	-	9
Gangræna	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Gastritis	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	1
Gonorr. virul.	3	1	-	3	2	1	1	1	4	2	1	3	2	22	-	-	2	-	-	24
Gastrodynia	-	-	1	-	-	-	-	-	-	-	1	-	-	2	-	-	-	-	-	2
Hæmorrhagia	-	-	-	-	-	1	-	-	-	-	1	-	-	2	-	-	-	-	-	2
Hæmatemesis	-	-	1	-	-	2	-	-	-	-	-	-	1	3	-	-	1	-	-	4
Hæmoptœ	-	-	-	1	-	1	-	-	1	1	-	-	-	3	-	-	-	1	-	4
Hæmorrhois	-	-	2	1	2	-	-	-	1	1	2	1	-	9	-	1	-	-	-	10
Carried forward,	26	32	51	52	62	55	27	29	74	74	58	47	43	551	32	21	14	3	9	630

PATIENTS ADMITTED.

DISEASES.	Rem. fin. la. yr.	Dec. 1790	Jan. 1791	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Diſorderly.	Rem. to their Hos. and H. of E	Remaining under care	Total.
Brought forward	26	32	51	52	62	55	27	29	74	74	58	47	43	551	32	21	14	3	9	630
Hydrothorax	-	-	1	-	-	1	-	-	-	-	-	1	-	-	1	-	-	1	1	3
Hemiplegia	2	-	1	-	-	-	-	1	1	-	-	-	-	3	-	2	-	-	-	5
Hepatitis	-	1	1	-	-	-	2	-	-	-	-	1	1	4	1	1	-	-	-	6
Hernia	-	-	-	1	-	-	2	-	-	-	1	-	-	1	-	3	-	-	-	4
Herpes	1	1	-	2	-	-		-	-	2	2	-	1	8	-	1	-	-	-	9
Hydarthrus	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	1
Hydrorachitis	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Hydroceph. Intern.	-	-	-	1	-	-	1	-	-	1	-	1	-	-	4	-	-	-	-	4
Hypochondriaſis	-	-	4	-	1	-	-	-	-	-	-	1	1	3	-	4	-	-	-	7
Hyſteria	2	3	1	1	4	1	2	3	2	3	1	-	-	18	-	5	-	-	-	23
Hydrocele	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	1	-	-	-	1
Icterus	-	-	1	1	-	-	-	-	-	2	1	1	-	4	1	-	-	-	1	6
Inſitio variol.	1	-	1	2	50	47	5	-	-	-	-	-	-	106	-	-	-	-	-	106
Iſchuria	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Leucorrhœa	2	-	1	-	-	-	-	-	-	-	-	-	1	3	-	-	-	-	1	4
Luxatio	-	-	-	-	-	-	-	1	1	-	-	-	-	2	-	-	-	-	-	2
Mania	-	-	-	1	1	-	-	-	-	-	1	1	1	3	-	-	-	2	-	5
Carried forward	34	37	62	62	119	104	39	34	79	82	64	53	49	707	40	39	14	6	12	818

PATIENTS ADMITTED.

DISEASES.	R. un. c. fin. la. yr.	Dec.	1791 Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Diſorderly.	Rem. to the H. and H. of E.	Remaining under care.	Total.
Brought forward,	34	37	62	62	119	104	39	34	79	82	64	53	49	707	40	39	14	6	12	818
Menorrhagia	-	1	1	1	2	1	-	1	-	1	1	-	1	9	-	-	-	-	-	9
Melancholia	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Nephritis	-	-	-	-	-	-	-	1	1	-	-	-	-	1	-	1	-	-	-	2
Odontalgia	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Otalgia	-	-	-	-	1	-	-	-	-	-	-	-	1	2	-	-	-	-	-	2
Ophthalmia	-	1	-	1	3	4	-	-	1	2	2	2	2	15	-	2	-	-	1	18
Pertuſſis	-	1	-	-	1	1	1	-	-	-	1	-	-	5	-	-	-	-	-	5
Paralyſis	1	1	-	-	1	2	-	-	-	1	1	-	-	5	-	2	-	-	-	7
Paronychia	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	-	1
Parturitio	-	1	1	1	-	-	-	-	3	1	2	-	-	9	-	-	-	-	-	9
Phlogoſis	-	1	-	2	1	-	-	-	4	-	1	1	1	11	-	-	-	-	-	11
Phrenitis	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Phthiſis	7	3	2	5	-	1	2	1	2	1	-	2	2	4	13	10	-	-	1	28
Pneumonia	4	2	8	5	10	7	7	2	3	7	1	4	8	65	1	-	1	1	-	68
Prolapſus Uteri	1	1	-	-	1	1	1	-	-	-	-	-	-	2	-	3	-	-	-	5
Ani	-	-	-	1	-	-	-	-	-	-	-	-	1	1	-	1	-	-	-	2
Pemphigus	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	-	1
Carried forward,	48	49	74	78	140	122	50	40	94	95	73	62	65	840	54	58	16	7	14	989

PATIENTS ADMITTED.																				
DISEASES.	R. un. c. fin. la. yr.	Dec. 1790	Jan. 1791	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Disorderly.	Rem. to the Hos. and H. of E.	Remaining under care.	Total.
Brought forward,	48	49	74	78	140	122	50	40	94	95	73	62	65	840	54	58	16	7	14	989
Pfora	1	-	9	2	-	3	1	-	-	3	2	4	4	29	-	-	-	-	-	29
Rachitis	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Rheumatismus	6	6	5	8	10	14	7	-	3	6	8	13	3	67	1	17	1	1	2	89
Scarlatina	1	-	-	-	-	-	-	2	3	1	-	-	-	7	-	-	-	-	-	7
Scrophula	2	-	1	-	-	-	-	-	-	1	-	1	1	2	-	1	-	-	3	6
Sphacelus	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
Synochus	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Syphilis	9	7	7	14	8	6	7	5	4	6	3	6	9	75	-	2	8	-	6	91
Tinea Capitis	-	-	1	-	-	-	-	-	-	1	-	-	1	3	-	-	-	-	-	3
Tussis	2	1	4	3	1	-	-	1	3	3	-	-	-	17	-	1	-	-	-	18
Tumores	1	2	5	-	-	2	1	-	2	-	3	-	1	16	-	1	-	-	-	17
Typhus	-	-	1	-	-	-	-	1	1	2	2	1	-	4	2	-	1	1	-	8
Varicella	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	1
Variola	-	5	3	6	13	12	15	14	11	4	2	-	1	69	16	-	1	-	-	86
Vermes	1	1	8	-	5	3	1	-	2	5	-	-	1	27	-	-	-	-	-	27
Ulcus	17	6	4	5	2	8	6	5	4	8	5	6	9	60	1	16	-	-	8	85
Ustio	2	1	2	-	-	1	2	-	-	1	-	2	3	12	1	1	-	1	-	15
Carried forward,	90	78	124	117	180	172	90	68	127	136	98	95	99	1230	75	98	27	11	33	1474

PATIENTS ADMITTED.

DISEASES.	R. un. c. fin. last yr.	Dec. 1799	Jan. 1800	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Discharged.	Rem. to the H. and H. of E.	Remaining under care.	Total.
Brought forward,	90	78	124	117	180	172	90	68	127	126	98	95	99	1230	75	98	27	11	33	1474
Vulnus	-	1	-	-	1	-	1	1	3	1	3	-	1	10	-	1	-	-	1	12
Vomica	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Vomitus	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Urticaria	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Total,	91	79	125	117	181	173	91	69	130	127	101	95	100	1242	75	99	27	11	35	1480

PATIENTS ADMITTED.																				
DISEASES.	R. unc. fin. la. yr	Dec. 1791	Jan. 1792	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct	Nov.	Cured	Dead.	Relieved.	Diforderly.	Rem to the H. and H. of E.	Remaining under care.	Total.
Abscessus	-	-	1	-	1	1	-	-	1	-	-	1	-	5	-	-	-	-	-	5
Albugo	-	-	-	-	-	1	1	-	-	-	-	-		-	-	2	-	-	-	2
Amenorrhœa	1	1	2	1	-	1	3	-	-	1	1	1		6	-	1	2	1	2	12
Anasarca	2	-	-	-	1	2	-	1	2	1	3	-	2	5	3	2	1	-	3	14
Amaurosis	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	1
Anchylosis	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Apoplexia	-	-	-	-	-	-	-	1	.	-	-	-	-	1	-	-	-	-	-	1
Ascites	-	-	-	1	-	-	2	-	-	-	-	-	2	2	-	1	-	-	2	5
Asthma	1	1	-	-	2	-	3	1	-	-	-	5	-	5	-	6	-	-	2	13
Atrophia	-	-	1	-	2	1	-	-	-	-	-	1	-	-	4	1	-	-	-	5
Caries	-	-	-	-	1	1	-	-	-	-	-	-	1	2	-	-	-	-	1	3
Cataractus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Catarrhus	1	5	7	4	9	7	10	4	-	-	-	4	5	50	-	-	-	-	6	56
Cephalalgia	-	-	-	1	-	-	-	-	-	-	1	-	-	1	-	-	-	-	1	2
Cholera	-	-	-	-	-	1	1	2	6	6	3	-	-	19	-	-	-	-	-	19
Infantum	-	-	1	-	-	-	-	2	12	11	5	-	-	27	3	-	1	-	-	31
Chorea	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	2
Colica	-	5	4	-	3	3	5	5	5	3	2	-	-	33	2	-	-	-	-	35
Carried forward,	7	12	16	7	20	18	26	16	26	22	15	12	10	156	12	14	7	1	17	207

PATIENTS ADMITTED.																			
DISEASES.	R. un. c. fin la. yr.	Dec. 1791	Jan 1792	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Disorderly.	Rem. to the Hos. & H. of E.	Remaining under care.	Total.
Brought over,	7	12	16	7	20	18	26	16	26	22	15	12	10	156	12	14	7	1	17	207
Constipatio	-	-	-	2	1	2	-	-	2	-	-	2	-	10	-	-	-	-	-	10
Contusio	1	1	1	4	2	2	1	2	1	4	5	1	-	23	1	-	-	-	1	25
Convulsio	-	-	-	-	1	-	-	-	1	1	-	-	-	1	2	-	-	-	-	3
Cynanche Parotid	-	-	-	-	-	-	-	-	2	-	-	-	-	2	-	-	-	-	-	2
——— Tonsil	-	-	-	1	1	-	-	-	-	-	-	1	-	3	-	-	-	-	-	3
——— Tracheal	-	-	1	1	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	2
Diarrhœa	-	-	1	1	-	3	4	2	8	3	3	14	1	32	7	-	-	-	1	40
Dysenteria	-	2	1	1	-	1	-	-	2	10	7	3	-	24	2	-	1	-	-	27
Dyspepsia	-	3	3	2	3	6	1	6	2	2	6	8	5	40	-	3	-	-	4	47
Dysuria	1	-	1	-	-	1	-	-	-	-	-	1	-	1	-	2	-	-	1	4
Epilepsia	1	1	2	-	-	1	1	2	-	-	1	1	-	1	-	8	1	-	-	10
Epistaxis	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-	1
Erysipelas	-	-	-	-	1	-	-	1	-	1	-	-	2	4	-	-	-	-	1	5
Eruptiones	1	1	1	1	3	2	3	1	2	2	-	-	2	17	1	-	-	-	1	19
Febris Remittens	-	3	-	1	1	-	-	1	2	8	11	11	2	31	5	-	4	-	-	40
——— Quotidiana	-	-	1	2	1	2	-	-	2	5	9	4	2	27	-	-	-	-	1	28
——— Tertiana	-	-	1	-	3	1	-	-	4	-	2	-	1	11	-	-	-	-	1	12
Carried forward	11	23	29	23	37	40	36	31	54	58	60	58	25	385	30	27	14	1	28	485

PATIENTS ADMITTED.

DISEASES.	R'un. c. fin. la. yr.	Dec. 1791	Jan. 1792	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Diſorderly.	Rem. to the H. and H. of E.	Remaining under care.	Total.
Brought forward,	11	23	29	23	37	40	36	31	54	58	60	58	25	385	30	27	14	1	28	485
Febris Quartana	-	1	1	-	-	-	-	-	-	-	-	2	-	4	-	-	-	-	-	41
puerpera	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Fiſtula in Ano	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	1	2
Fractura	-	-	1	-	-	1	1	-	1	-	-	-	-	3	-	-	-	1	-	4
Gonorrhœa Virul.	-	2	2	2	-	4	3	1	3	3	1	-	1	21	-	1	-	-	-	22
Gaſtrodynia	-	-	-	-	1	-	-	2	-	-	-	-	-	3	-	-	-	-	-	3
Hæmoptœ	-	2	-	2	-	-	-	-	-	-	-	1	1	5	-	-	-	-	1	6
Hæmorrhois	-	-	-	-	-	1	-	-	-	1	-	1	-	3	-	-	-	-	-	3
Hydrothorax	1	-	-	-	-	1	-	-	-	-	-	-	-	1	1	-	-	-	-	2
Hemiplegia	-	-	-	-	-	1	-	1	1	-	-	-	-	2	-	1	-	-	-	3
Hepatitis	-	2	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	2
Hernia	1	-	-	-	1	1	-	-	-	-	-	-	-	1	-	2	-	-	-	3
Herpes	-	-	1	-	-	1	-	-	-	1	-	2	-	5	-	-	-	-	-	5
Hydarthrus	-	1	-	-	-	-	-	1	-	-	-	-	-	1	-	1	-	-	-	2
Hydroceph. Intern.	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	1
Hypochondriaſis	-	1	-	-	1	1	-	-	1	1	-	-	-	4	-	1	-	-	-	5
Hyſteria	1	1	3	2	3	3	3	3	1	1	2	1	-	17	-	7	-	-	-	24
Carried forward,	14	34	38	29	44	54	43	39	61	66	63	65	27	457	33	41	14	2	30	577

PATIENTS ADMITTED.

DISEASES.	Rem. un. c. fin la. yr.	Dec.	Jan. 1793	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Disorderly.	Rem. to the... and H. of E.	Remaining under care.	Total.
Brought forward,	14	34	38	29	44	54	43	39	61	66	63	65	27	457	33	41	14	2	30	577
Hydrocele	-	-	-	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-	-	1
Icterus	1	-	-	-	-	-	1	1	-	1	-	-	-	3	-	1	-	-	-	4
Insitio Variolar.	-	1	-	-	1	24	14	-	-	-	-	2	-	42	-	-	-	-	-	42
Ischuria	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Leucorrhœa	1	-	-	1	-	1	2	-	-	1	-	-	-	5	-	-	1	-	-	6
Luxatio	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	1
Mania	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	2	-	2
Menorrhagia	-	1	1	-	2	1	-	-	1	1	-	-	-	7	-	-	-	-	-	7
Melancholia	-	-	-	-	-	-	1	-	-	1	-	-	-	1	-	1	-	-	-	2
Nephritis	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Odontalgia	-	-	-	-	-	-	-	-	-	2	-	-	-	2	-	-	-	-	-	2
Ophthalmia	1	-	-	1	4	2	1	1	2	5	1	5	2	20	-	2	-	-	3	25
Otalgia	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	1
Paralysis	-	-	-	2	-	-	1	-	-	-	-	1	-	1	-	2	-	-	1	4
Paraphymosis	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Paronychia	-	2	-	-	1	-	-	1	-	-	-	-	1	4	-	-	1	-	-	5
Parturitio	-	-	2	1	-	-	-	-	-	1	-	1	2	7	-	-	-	-	-	7
Carried forward,	17	38	41	35	53	83	64	42	65	81	64	74	32	554	33	48	16	4	34	689

PATIENTS ADMITTED.

DISEASES.	R un. c. fin. la. yr.	Dec. 1791	Jan. 1792	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Cured.	Dead.	Relieved.	Diſorderly.	Rem. to the Hos and H. of E.	Remaining under care.	Total.
Brought forward,	17	38	41	35	53	83	64	42	65	81	64	74	32	554	33	48	16	4	34	689
Pertuſſis	-	-	-	-	-	-	-	-	-	1	1	-	-	2	-	-	-	-	-	2
Phlogoſis	-	1	-	1	4	-	-	-	-	-	-	-	-	6	-	-	3	-	4	6
Phthiſis Pulmon.	2	7	6	-	4	5	5	3	2	2	4	6	-	7	17	13	-	2	1	46
Phyſconia	-	-	-	-	-	-	2	-	-	-	-	-	-	-	1	1	-	-	-	2
Pneumonia	1	5	5	11	10	4	2	4	2	6	4	2	1	56	1	-	-	-	-	57
Podagra	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	1	-	-	-	1
Prolapſus uteri	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1
ani	-	-	-	-	-	-	-	1	-	-	-	1	-	2	-	-	-	-	-	2
Pſora	-	3	1	2	-	-	2	1	4	2	-	-	-	15	-	-	1	-	-	15
Rachitis	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1
Rheumatiſmus	2	7	10	7	4	4	6	4	8	-	7	10	4	55	1	10	1	-	6	73
Scarlatina Angin.	-	-	-	-	-	-	-	-	1	-	-	1	1	3	-	6	-	1	1	3
Scrophula	3	-	1	1	1	1	-	-	1	1	-	-	-	1	-	-	-	-	-	9
Spaſmi	-	-	-	-	-	-	1	1	-	1	-	-	-	3	-	-	-	-	-	3
Sphacelus	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	-	1
Splenitis	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	1
Synocha	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1
Carried forward	25	61	64	57	76	97	82	57	85	94	81	95	39	705	54	79	21	7	47	913

PATIENTS ADMITTED.

DISEASES.	Rem. c. fin. la. yr.	Dec. 1791	Jan. 1792	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct	Nov.	Cured.	Dead.	Relieved.	Discharged disorderly.	Rem. to the H. and H. of E.	Remaining undecare.	Total.
Brought forward	25	61	64	57	76	97	82	57	85	94	81	95	39	705	54	79	21	7	47	913
Synochus	-	-	-	-	-	-	2	-	-	-	-	-	-	2	-	-	-	-	-	2
Syphilis	6	2	11	7	3	7	14	2	7	6	10	8	11	69	2	7	1	2	13	94
Tetanus	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	1
Tinea capitis	-	-	2	-	-	2	-	-	-	1	2	1	1	8	-	-	-	-	1	9
Tumores	-	-	-	-	1	2	2	3	1	3	-	-	2	11	-	-	1	-	2	14
Tussis	1	-	-	2	2	-	2	4	2	4	-	2	2	16	-	2	-	-	3	21
Typhus	-	-	-	-	1	3	-	2	-	3	1	6	3	13	3	-	1	-	2	19
Variola	-	3	1	-	-	-	-	-	2	-	-	-	-	3	2	-	1	-	-	6
Verines	-	3	2	2	1	3	7	2	2	4	-	2	1	29	-	-	-	-	-	29
Vertigo	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	-	1
Vulnus	1	3	2	3	1	1	2	-	2	1	-	-	-	14	-	1	-	1	-	16
Vomica	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Vomitus	-	-	-	-	-	1	-	1	-	-	-	-	-	2	-	-	-	-	-	2
Ulcus	8	2	2	3	2	7	5	9	5	9	4	3	3	41	-	6	5	2	8	62
Ustio	-	-	1	-	2	1	2	-	-	-	-	-	2	6	-	-	-	-	2	8
Total,	42	74	85	74	89	124	118	80	108	125	98	117	64	920	62	96	30	12	78	1198

MEDICAL

TRANSACTIONS.

MEDICAL TRANSACTIONS.

I.

Case of Curvature of the Spine, by Thomas Dolbeare, *in a letter to* Benjamin Rush, *M. D. Censor of the College, and Professor of the Institutes, and of Clinical Medicine in the University of Pennsylvania. Read September* 4, 1787.

London 5th May, 1787.

SIR,

SEEING the publication from your medical society, I send you the enclosed for the benefit of my fellow creatures, via Boston, where I have a brother, Mr. John Dolbeare, that

that ſhould you want any further information, through him you may receive it. With my beſt wiſhes to ſo laudable, chriſtian an inſtitution.

I am, Sir,

Your moſt obedient ſervant,

THOMAS DOLBEARE.

Dr. Benjamin Ruſh.

IN September preceding it, (1792) I was taken deaf (which came on gradually for a week) I could not hear a word. and while electrifying for it the ſucceeding April, I was taken when walking the ſtreet with a ſmall pain in the calves of my legs, by which my walk was much impeded, my hands and arms were conſiderably affected at the ſame time, though not ſo much as my legs---in a few hours I found myſelf much weaker in walking, but went out as uſual—in two or three days, in going up and down ſtairs my knees gave way---Still I went out, and ſhortly after, I fell down in the ſtreet, and was unable of myſelf, to get up ; but after being taken up, could walk 100 yards or more, but could not get into a carriage without aid---My reſpiration

tion was very heavy—It was treated as paralytic, but it is quite another matter. In about ten days I had great pains in my back-bone, for which nothing was done nor was it even looked at, and I found great coldneſs in my lower limbs, my toes hung down, and my heels would not come to the ground, and my knees came together. After being in this ſtate about three weeks I went to Bath, where, on the pain in my back-bone continuing (for which bladders of warm water, and ſometimes a book was applied, laying that part of my back on the book, where the pain was, by which I was ſomething relieved) the apothecary deſired to look at it, when he at once diſcovered the curvature of two or three joints in the middle, on which a conſultation was held, and pumping in the warm bath recommended and adopted; but in a few days I had two mortifications in my poſteriors, and urinal ſtoppage ſoon after, together with a prodigious coldneſs in my legs and feet, ſo much ſo that I doubt if I ſhould have *felt* if they had been amputated—the cure of the mortifications took two months, after which purging was renewed, from which I had but little benefit—I had ſpaſms ſoon after I got to Bath that *violently*

ſhook my body, and they continued for two years, but not violently, but are now off—I was unable to move a toe, or turn in my bed of myſelf. After being in Bath ſix months, I came to London and ſent for Mr. Pott, who immediately recommended cauſtics to bring on a diſcharge, on each ſide of the curvature—ſo ſoon as they were applied and he found the diſcharge effected, he at once ſaid I ſhould walk and do buſineſs as well as I ever did, and ever ſince I have been recovering, and I can now walk ten miles a day with a cane, and am ſtill recovering, on every application—I have had eight cauſtics (always two at a time) and five ſetons—I always benefit very ſoon after a diſcharge—but moſt from the cauſtic—and I *ſenſibly feel* the obſtructions remove—I find the fleſh on my thighs to recover the leaſt of any part—my legs were little more than ſkin and bone, and the abdomen was ſwelled to a prodigious ſize—the curvature was gone in about four months after the application—I have been obliged to take purgatives ever ſince, almoſt conſtantly;—my appetite and ſpirits have been generally very good—

I find myſelf more active and juvenile than for a conſiderable time before I was taken---I then was 36---Mr Pott ſays, he never knew one to have it that was above 40---and it is moſt common to children from eight to twelve---(vide his publications thereon) I do not find my recovery altogether progreſſive, for I have intervals of a fortnight or three weeks that I am at a ſtand---the time of recovery is quite uncertain, it is ſometimes in a few *months*, and at other times ſeveral *years*, ---as I recover of the curvature ſo my *hearing* returns---I mean to keep up the operations at all events.

II.

Caſe of an Hydrocephalus Internus, ſucceſsfully treated by Mercury. By Dr. Michael Leib, *Fellow of the College. Read January* 1, 1788.

WILLIAM COLES, aged three years, ſon of William Coles, printer, in Black-Horſe alley, was admitted as a Diſpen-

ſary patient on the 11th of September 1787. His ſymptoms were as follow, viz. extreme dilatation of the pupils of the eyes, ſtrabiſmus, violent pain in the head, his hand in conſtant motion towards it, frequently crying out "Mammy Oh! my head tie it up, tie it tight," uneaſy and ſhort ſlumbers, with frequent ſtartings as if ſuddenly affrighted, ſtupor, a deſire to be in the dark and extreme uneaſineſs at the approach of the leaſt light, pulſe ſmall and frequent, ſkin hot and dry. As worms in the primæ viæ frequently produce a train of ſymptoms counterfeiting hydrocephalus internus, a briſk cathartic of calomel and rhubarb was exhibited, which gave ſeveral dejections, and diſcharged a few ſmall worms; but as the cathartic made no impreſſion on the diſeaſe, he was ordered, on the 12th, Calomel gr. xij in four powders, one of which was to be given morning and evening.

13th. Symptoms increaſing in violence, his countenance maniacal, his eyes inſenſible to light, conſtant moaning and complaints of the head, pulſe ſmall, and leſs frequent. The calomel had no effect upon his bowels.

14th,

14th. 12 grains of calomel were ordered as before—no variation in the diſeaſe.

15th. Bowels untouched by the calomel, pulſe more frequent, ſkin hot and dry.

16th. 16 grains of calomel and 2 grains of tartar emetic were ordered in 8 powders, one of which was to be taken every third hour; a few looſe ſtools were produced.

17th. 20 grains of calomel with 5 grains of opium were exhibited in 8 powders, one of which was ordered every third hour—a bliſter was applied to the back of the neck.

18th. The bliſter roſe well, but gave no relief—the opium diſpoſed too much to ſleep.

19th. 16 grains of calomel with gum arabic divided into 8 parts were exhibited every third hour---ſymptoms ſomewhat mitigated, pulſe leſs frequent, ſkin more temperate, bowels more regular, urine in ſmall quantity.

20th. A large worm of the lumbricus kind was diſcharged---ſymptoms as before.

21ſt. The diſeaſe appeared ſtationary, little alteration being obſervable.

22d. 16 GRAINS of calomel with mucilage of gum arabic and tincture of bark were exhibited in a mixture of four ounces, two tea ſpoons full of which were ordered every 2nd. hour. The calomel affected the mouth and throat with ſwelling. Symptoms much moderated; pupils ſomewhat contracted, pain in the head much abated, pulſe regular, urine copious. He called for victuals, eat a little, and noticed objects.

23d. Symptoms on the decline—ſwelling of the throat and tongue increaſed, but no ſpitting.

24th. Pupils much contracted, pain in the head removed, pulſe natural, ſkin temperate, bowels regular, urine copious, he ſlept well, had a good appetite, laughed, and ſeemed diſpoſed to play.

25th. SWELLING of the throat and tongue continued, which made him uneaſy—no ptyaliſm.

26th.

26. The calomel was diſcontinued as the diſeaſe appeared to be ſubdued.

27th. Pain in the head and ſymptoms of uneaſineſs returned—20 grains of calomel were ordered in a mixture as before.

28th, 29th, and 30th. He continued recovering—no ſymptom but a ſmall dilatation of the pupils remaining—He walked about, was cheerful, and eat heartily.

The quantity of calomel exhibited in this caſe from the 12th of Sept. to the 28th. was 112 grains.

It is worthy of remark that no impreſſion was made on the diſeaſe till the mercury affected the mouth, at which time a copious diſcharge of urine was produced and immediate relief obtained.

On enquiring if any injury in the head had been ſuſtained by the child, the mother mentioned that he had received a violent fall on the head a few days before his illneſs, which had rendered him inſenſible for ſome moments. May not this (as Dr. Fothergill ſuppoſes)

poſes) have cauſed a rupture of a lymphatic in the brain, and have produced the diſeaſe?

III.

An account of a TETANUS *from the extraction of two teeth, ſucceſsfully treated by the uſe of* wine *and* mercury.—*In a letter from* Benjamin Ruſh, M. D. *to* John Redman, M.D. *Preſident of the College of Phyſicians of Philadelphia. Read May* 6, 1788.

DEAR SIR,

IT is not leſs from reſpect to the rank you hold in our college, than from motives of a perſonal nature, that I have taken the liberty of addreſſing, through you, my firſt communication of a medical caſe to the College of Phyſicians.

ADAM SIRBIT, a ſailor, aged about thirty years, came into the Pennſylvania hoſpital to be cured of ſore legs. Soon after his admiſſion he was afflicted with a pain in one of the molares of the upper jaw, for which I ordered him to have his tooth drawn. In extracting

ing the affected tooth, a found tooth was unfortunately broken, with a ſmall portion of the jaw-bone, and the roots of the tooth left in the bone. A few days after this operation he acted as door-keeper to the hoſpital, in which ſtation he was expoſed to a cold damp air, the morbid effects of which were rendered more certain, from his having been previouſly confined to a warm and comfortable ſtove room. February 2nd. 1788, the day after he ſerved in this capacity, he was affected with a *triſmus*, accompanied with a ſwelling on each ſide of his throat—a full pulſe—and a total inability to ſpeak. He complained of neither pain nor rigidity in any part of his body except in the places abovementioned. Upon the moſt minute examination of his caſe, I candidly acknowledged in the preſence of the young gentlemen who attended my practice in the hoſpital, that I was at a loſs to determine whether it was a tetanus or the ſore throat, which then prevailed in the city and neighbourhood (and as uſual) with many anomalous ſymptoms. The fulneſs of his pulſe indicated bleeding; but leaſt the diſeaſe ſhould prove to be ſpaſmodic, I called upon my colleague Dr. Hutchinſon

chinſon, who was then in another apartment of the hoſpital, and aſked his advice with reſpect to the propriety of that remedy. The Dr. did not heſitate a moment in adviſing the opening a vein, and under the influence of the ſame ideas of the diſorder which dictated this advice, I gave my patient two grains of tartar emetic, and ordered a bliſter to be applied to his neck. Within a few minutes after he was bled, our doubts of the nature of his diſorder were ſuddenly removed, for he was ſeized with convulſions of the opiſthotonos kind.—The triſmus continued without any change —and he now began to complain of a pain (which ſeldom fails of attending the tetanus) at the bottom of the ſternum. As ſoon as theſe ſymptoms diſcovered themſelves, I ordered him to take Port and Madeira wines for his common drink, with as much bark as he could ſwallow, and to have the outſide of his throat and jaws rubbed with mercurial ointment.

Feb. 3. I had the pleaſure of finding a conſiderable abatement in the ſymptoms of the tetanus. He opened his mouth near half an inch, and complained of no pain. He took

took, in the courſe of the laſt four and twenty hours, *five quarts* of wine, the greateſt part of which was conveyed into his ſtomach through the aperture made by the loſs of his two teeth. He took in this time only one ounce of bark, owing to the extreme difficulty of conveying it through the abovementioned opening into his ſtomach. In the courſe of the time that has been mentioned, he ſpit about a pint.

Feb. 4th. He took about three quarts of wine ſince yeſterday—continued to ſpit plentifully—and opened his mouth ſo as to admit two of my fingers placed over each other.

Feb. 5th. I found him ſitting up by the ſtove,—and able to ſpeak diſtinctly. His jaw was perfectly free from rigidity, and he appeared to be in his uſual ſtate of health.

A FEW days after his recovery, a ſmall piece of his jaw bone which had been detached in the extraction of his teeth, projected above his gum, and was taken away.

IT may not be improper to add here, that the tartar emetic which I gave him the firſt time I ſaw

ſaw him, produced no operation upon his ſtomach, or bowels. His fæces during every ſtage of his diſorder were diſcharged by means of glyſters. I mention this fact in order to reduce to greater certainty, the ſymptom of coſtiveneſs belonging to the tetanus. Dr. Cullen expreſſes a doubt whether this ſymptom be the effect of opiates or of the diſeaſe*. In the preſent caſe it was certainly the effect of the diſeaſe, for he did not take in any ſtage of his diſorder, *a ſingle grain of opium*.

I SHALL conclude with the following obſervations.

I HAVE heard of two inſtances of tetanus following the extraction of teeth, both of which proved fatal. One was in St. Thomas's hoſpital in London,—the other was in Bucks county in this ſtate.

I HAVE ſeen ſeveral inſtances of an obſtinate rigidity in the lower jaw ſucceed the extraction of a tooth, which yielded, without any alarming

* Firſt Lines MCCLXV.

alarming ſymptoms, to confinement and emollient applications.

I HAVE heard of one caſe of a conſtriction of the lower jaw after the extraction of a tooth being cured by the jaw being preſſed down by a ſtrong mechanical force.

I communicate theſe facts without attempting to reaſon upon them. Perhaps when more facts of a ſimilar nature are collected, and more minutely deſcribed, we may be able to diſtinguiſh with preciſion when the rigidity of the lower jaw, which follows the extraction of a tooth, may be conſidered as a local complaint, or as a ſymptom of general diſeaſe.

IV.

An account of the Tænia discovered in the Liver of a number of Rats---In a letter from Dr. Joseph Capelle, *of Wilmington, to* Benjamin Rush, *M. D. &c. Read May 5th, 1788.*

Wilmington, March 20th, 1788.

DOCTOR BENJAMIN RUSH,

SIR,

PERSUADED that you are always disposed to encourage any thing which may lead to new discoveries, particularly in that science which you profess, I therefore take the liberty of addressing to you the enclosed observations, requesting that you would lay them before the medical society, if you think them worthy of their attention.

I COULD wish that the subjects of my enquiries had been nobler ones than rats; and yet if

if we may believe medical records, ſome of the moſt valuable diſcoveries, which have contributed greatly to the perfection of medical knowledge, have been made by zoologiſts—Whether this is new or not, I cannot ſay; but it is ſo to me, and this is the motive that has induced me to lay it before you.

Wilmington, January 17th, 1788. Upon opening the abdomen of a rat, I was ſtruck with the appearance of three tubercles on the convex part of the liver. They were of a whitiſh and tranſparent colour, and appeared to me to be fat. This particularly led me to take out the liver, on the concave part of which I diſcovered two more tubercles. I detached one of them to ſee what kind of ſubſtance they were compoſed of, whether glandular, or containing nothing elſe than a lymphatic humour; when, to my great ſurprize, after deſtroying the matrix or enveloppe, I found it contained a worm of the Tænia kind, alive, and about ſixteen inches long—I opened another matrix, and found a ſimilar worm of about the ſame ſize. I examined a third tubercle, which was ſmaller than the former, and found the matrix much thicker, which I

ſuppoſe

ſuppoſe was owing to the worms not having diſtended it. In this matrix I found eight ſmall worms, and an infinite quantity of ſmall ſubſtances much reſembling fly blows, which I judged were eggs. The largeſt of the worms was about an inch long; the others very ſmall, but eaſily diſtinguiſhable ſo as to leave no doubt of their being worms.

Being of opinion that this was ſomething new, I thought proper to preſerve the other two tubercles in ſpirit of wine.

The rat from which this liver was taken was very fat, and the liver, I thought, uncommonly large, but it appeared no ways diſeaſed—I alſo obſerved that the larger the worm was, the thinner was the matrix, which induced me to believe, that in a future day, it would have forced its way through it, and have fallen into the abdomen.

It appears to me that theſe animals originated in this viſcus—Each of them had a bed or cavity, proportioned to its ſize and figure, and was connected to it by a tiſſu, ſimilar to that

that which unites the muſcular fibres.—Theſe matrices contained a white ſerum; and as I could not perceive blood-veſſels of any kind in them, I concluded that the worms muſt have derived their ſubſiſtence from the lymphatics.

January 21. I opened another rat, but did not diſcover any thing particular in it. This animal was of a middle ſize, and had but a very ſmall liver.

January 23. I opened a third rat, in the liver of which I found a matrix containing a tænia of about eight inches in length, when ſtretched; but as it was alive it contracted itſelf to about five inches—I alſo diſcovered a white ſpeck, about the ſize of a common pin's head, in which, by the aid of a microſcope, I diſcovered a ſmall worm—This animal was very fat, and the liver of a good proportion.

January 27. Opened a fourth, and found but one matrix, containing a worm of the ſame kind—This animal was large and its liver was of an uncommon ſize.

As theſe rats were all caught in the ſame neigh-

neighbourhood, I was inclined to believe that their diet might be the cauſe of theſe particularities—I therefore determined to get a few from another place, and procured ſome from the Brandywine Mills, the biggeſt had in its liver, ſeven matrices, the largeſt of which had partly fallen from the liver, the worm had pierced the matrix, and had nearly eſcaped from it—This confirms my firſt ſuppoſition—But whether the rat feels any inconvenience after their eſcape from the liver, how they get rid of them, or whether this is a diſeaſe peculiar to theſe animals, in all ſeaſons and climates, &c. is a point which I leave to men of more abilities to determine.

It does not appear that theſe worms breed in one part of the liver in preference to another, as I have found them in every part of it —When confined in the matrix they are in a convoluted ſituation.

I THINK it needleſs to give you a further particular deſcription of the rats I opened, as I found the ſame appearances exiſting in ſixteen out of eighteen that were the ſubjects of my zoological reſearches—I ſhall conclude with

 obſerving,

obſerving, that in one of the laſt I found nine matrices, each of them containing worms of the tænia kind—Three of them had diſengaged themſelves from their matrices, two lay on the inteſtines, and the other on the liver—I ſhall further obſerve, that the two rats, in which I found no worms, were very lean, and their livers ſmaller in proportion than the others.

April 8, 1788. Since writing the other part of this letter, I opened a rat, in whoſe ſtomach I found thirteen worms, diſtinct from each other, twelve tape worms, and a round one. The tæniæ were abundantly broader and larger than thoſe found in the livers of the other rats—As this was the firſt in whom I diſcovered this appearance, I did not take a particular deſcription of it, but ſhould my future diſſections diſcover any thing particular, I will do myſelf the pleaſure to communicate it to you.

P. S. Should you wiſh for any further information, Doctor Duffield, Senr. will be kind enough to give it to you, as he was preſent at one of my diſſections. If any fur-

ther enquiries on this ſubject are thought neceſſary, I will cheerfully undertake them, I mean I will cheerfully aſſiſt in them.

V.

Caſe of Tetanus, by William Clarkſon, M. B. *Fellow of the College. Read June 3d,* 1788.

AS this college was inſtituted for the purpoſe of promoting medical enquiry, I think it the duty of every member to communicate from time to time ſuch information as may tend to advance the Science of medicine. Impreſſed with this ſentiment, I have drawn up the following caſe, and flatter myſelf that, although it has proved unſucceſsful, it will not therefore be altogether unuſeful.

ON Friday April 4, 1788, a young hearty man, 20 years of age, being at work in

in the ſhip yard of Mr. John Hutton, trod upon a ruſty nail, and immediately felt exquiſite pain, which, however, ſoon abated, and entirely ceaſed by the end of the ſecond day.

Friday April 11th. he went with ſeveral of his fellow workmen down the river to raft lumber, and wrought very hard, during this day, in the rain and in the water. He was expoſed all the ſucceeding night, in his wet clothes, to the open air, and to the cold wet earth for his bed.

Saturday April 12. his fatigue was renewed, and he laboured ſo hard in the rain, that pain in the ſtomach and limbs, with extreme wearineſs, obliged him to requeſt a comrade to take his oar and relieve him.

Sunday morning, 13th, very early he was brought home, when I was ſuddenly called to his aſſiſtance, and received the above account. I found him ſuffering excruciating pain in the epigaſtric region, pains in all the limbs, with great wearineſs as from ſevere fatigue. He found difficulty in opening the mouth from a ſenſe of ſtiffneſs of the jaw. He was free from

fever, the pulſe being neither quick nor tenſe, the belly was bound—he was without appetite, as had been the caſe for ſeveral days—The wounded foot was apparently ſound and gave no pain when preſſed. At firſt I was alarmed, but undetermined as to the cauſe of the complaint. From the aſſurance of the patient and others who knew him, that he was liable to ſtiffneſs of the jaw from tooth-ach, and from taking cold, I was inclined to hope that his diſeaſe might have ariſen from his late ſevere expoſure to the weather and fatigue.—I directed 70 drops of the Thebaic tincture immediately; wet hot cloths were applied to the region of the ſtomach; and after ſome time, when the pain had moderated, a ſtrong infuſion of ſenna, &c. was given. The jaws were anointed with a volatile oily liniment. In the evening I found him greatly relieved from pain, and that the laxative had produced a copious and very fœtid diſcharge. For the night a diaphoretic anodyne draught was ordered.

Monday 14th. Early this morning I was told that my patient had paſſed a reſtleſs night with great pain at ſtomach, extending through the

the back, frequent jerkings of the neck backwards, and profuſe ſweating, all which had diſtreſſed him, ſince two o'clock in the morning—Suſpecting a foul ſtomach to aggravate his ſymptoms, I ordered a gentle emetic. This brought off a great quantity of cauſtic, porraceous bile with much relief. Notwithſtanding this circumſtance, I concluded I ſhould have to combat with Tetanus. For, beſides the abovementioned ſymptoms, about noon the muſcles of the neck became rigid, the jaws were with difficulty opened; the recti and other abdominal muſcles were tenſe and retracted; ſome pain in the act of ſwallowing; a diſtreſſed contracted countenance; pulſe feeble though regular, and palpitation of the heart. I directed the ungt. merc. fort. to be often rubbed upon the neck and jaws, Thebaic tincture to be given freely at ſhort intervals, with a liberal uſe of wine and the bark. Scalded bran was applied very warm to the ſtomach.

Tueſday 15th. This morning found my patient better, as he had reſted in the night—The ſole of the foot where the puncture had been received, being ſomewhat painful when preſſed, led me to lay it open, and to apply

ſpirits

ſpirits of turpentine, to induce a topical inflammation. The twitchings of the neck ſtill continued, but the intervals of relaxation were lengthened. He complained of pain and ſtiffneſs of the ſhoulders, with ſpaſms of the arms and legs; the jaws were within half an inch of being cloſed; pain in ſwallowing was diminiſhed; the pulſe more ſlow, ſmall and ſoft; the tenſion of the abdominal muſcles and the retraction at the ſcrobiculus cordis unabated; the countenance leſs diſtreſſed, great thirſt and deſire of cold drinks—During the laſt 24 hours he had taken two quarts of wine and 300 drops of liquid laudanum, with but little appearance of intoxication; the bark alſo was continued——This evening, the ſymptoms much as in the morning—The irritability of the ſyſtem increaſed, for the leaſt noiſe in the room, or any one ſpeaking to him ſuddenly, occaſioned violent jerks—The orbiculares palpebrarum were remarkably contracted, and the ſpaſmus cynicus frequently diſtorted the whole viſage—He ſlept but little this day and began to nauſeate the bark.

Wedneſday 16. A. M. Had ſome reſt laſt night, but was diſturbed by company. Took bark,

bark, wine, and laudanum freely. The frictions of mercurial ointment were continued. His limbs are more relaxed; ſpaſms at the ſcrobiculus cordis are frequent; pulſe ſoft and beating 90 ſtrokes; the countenance more placid; ſome pain at the wound, but little ſuppuration. The above medicines were ordered to be perſiſted in. The wine which he drank laſt night being moſtly diluted, he now requeſted ſome unmixed, and expreſſed his agreeable ſenſations when taking it in that ſtate. A clyſter emptied the bowels of much flatus, and the application of the ſcalded bran always afforded relief. Having ſeen the good effects of the Haarlem oil, in a tetanic complaint produced by cold, in a ſubject who followed the painter's buſineſs, I was led to alternate it with the laudanum, giving 25 drops of the former, every two hours, in a ſpoonful of wine.——Evening. The above medicines had been uſed punctually, and the oil gave very ſenſible eaſe whenever it was taken.

Thurſday morning 17th. He reſted tolerably laſt night, and upon his ſide for the firſt time. He expreſſed much ſatisfaction in the uſe of Haarlem oil, which warmed the ſtomach

mach and eaſed his pains conſiderably, but complains now that the wine affects his head with intoxication. He took but 45 drops of the thebaic tincture in the night. The ſpaſms were far from being frequent or diſtreſſing. The abdominal muſcles were much relaxed. The pain of the ſtomach was inconſiderable. The motion of his head more under the patient's command. The pulſe ſoft and ſlow not exceeding 70 ſtrokes in a minute. I now began to be flattered with hopes of ſucceſs, and by his deſire, I remitted the ſtrict uſe of the wine and bark.——Evening. The ſcene became changed, for the convulſions were now ſtrong and frequent. He had, while I was preſent, one ſevere ſpaſm over the whole ſyſtem; and his head, body and extremities being rigid, he turned himſelf forcibly from his back to his ſide—This paroxyſm was but momentary, and a general relaxation ſucceeded.

Friday Morning 18th. The laſt night he was reſtleſs—The convulſions frequently diſturbed him. This morning his head was much affected; and he had the appearance of one ſomewhat intoxicated, talking inceſſantly,

and

and desiring to be shifted from his side upon his back, and *vice versa*. The pulse was soft and beat 70—The abdomen was quite relaxed, as also the muscles of the neck—Discharged wind freely per anum. Some suppuration at the wound. The volatile alkali was substituted for wine, as this disagreed with him. A bolus of calomel was ordered to move the bowels—60 drops of thebaic tincture to be exhibited every two hours with diluted wine as drink—Evening. The convulsions were frequent and severe during this day. The rigidity of the body prevented him from sitting up in his bed.—The jaw was stiff, though not closed—He made frequent complaints of danger from strangling, when about to swallow. He was distressed with heat, and earnestly desired fanning, and would scarcely suffer any intermission of this operation. He had swallowed an ounce of the the thebaic tincture since the morning. The bark also had been liberally used. No stool for two days, therefore repeated calomel bolus and a laxative clyster.

Saturday 19th. He was perfectly free from spasms last night, but was restless; had a plentiful

plentiful fœtid dejection. He drank near a quart of wine, diluted, and took 25 drops of the Haarlem oil every two hours during the night, 3i. of the volat. alkali alſo was taken---Panada and other light food were adminiſtered freely.---The pulſe this morning languid, beating 65 ſtrokes. The jaw more relaxed, and the palpitation abated. His head but little diſturbed, and he ſat up without any uneaſineſs about the neck—Noon, the bad ſymptoms returning, recourſe was had to the former remedies—Evening. The ſwallowing is become difficult—conſtantly craves cold drink which was moderately allowed---General convulſions came on, which continued for a ſhort time, and at length, in the night he died rigid.

In concluſion of this caſe, I have to remark, that I was flattered with hopes of ſucceſs, from the adoption of the above plan, inaſmuch as bleeding and other relaxing means have ſo often proved ineffectual---and eſpecially as ſo many appearances of debility ſeemed to juſtify the uſe of tonics and ſtimulants, which of late have proved ſo ſucceſsful in caſe of tetanus---

nus---How far an extenſion of the tonic method, even to immerſion in cold water, might have contributed to a cure, I ſhall not undertake to determine.

THIS patient was aſſiduouſly attended---and in the courſe of the diſeaſe he took twelve quarts of good wine, near three ounces of the thebaic tincture about four ounces of the bark---half an ounce of Haarlem oil, and two drachms of the volatile alkali---near two ounces of the ſtrong mercurial ointment were rubbed into the neck and jaws.

ALTHOUGH the mercurial frictions ſalivated the nurſe for near a week, there was but little appearance of pyaliſm in the patient.

VI.

VI.

Account of the ſucceſsful application of cold water to the lumbar region in calculous caſes. In a letter to Benjamin Ruſh, M. D. *&c. Read Sept. 2nd.* 1788.

Atherſtone, March 15, 1788.

SIR,

WHEN I was in America, and ſeveral years before I left England, ſay from about the twenty fifth year of my age, I was terribly afflicted with the gravel; and three or four times in a year, paſſed large rough pieces, which occaſioned violent fits of the ſtone cholic, ſo that my life appeared frequently in great danger; but now, by the bleſſing of God, *I have* diſcovered a method of preventing thoſe terrible fits of the ſtone, ſo that I have not had one of them for near two years, and my remedy has been tried by another perſon with equal ſucceſs.

AND

And as I wiſh to do all in my power, to relieve thoſe that are afflicted with that complaint, I ſhall inform you of my method of prevention. Having been a great ſufferer for twenty five years, I was led to read every author I could meet with who wrote on the ſtone and gravel; by which means I learned that moſt of thoſe that are afflicted in that way, are of a relaxed habit of body; on which I thought if I uſed a partial cold bath, on the ſmall of my back, it might be of ſervice to me. Accordingly after I had paſſed ſome ſtones, I had reaſon to hope there were no more large ones left in my kidneys—I began the application. I placed a baſon of cold water on a night chair, and on getting out of bed every morning ſtripped myſelf naked, and placing myſelf over it, I applied a large wet ſpunge to the ſmall of my back two or three times, and I ſometimes applied it to my fundament and the genitals; the conſequence of which has been, that the veſſels of my kidneys have been contracted and ſtrengthened, ſo that they have expelled the ſand and gravel as faſt as it formed or generated, ſo that though I paſs as much ſand and gravel as before, I have never had a bad fit ſince I began

began with the above method which is now nearly two years. I ſhould remark, that I always uſe a dry towel immediately after the application, and uſe all the exerciſe I can. If giving you this information, ſhould be the the means of relieving any one perſon in America it would give me great pleaſure.

JOHN WILLDAY.

VII.

Caſe of Hydrocephalus Internus, with the appearance on diſſection. *By Dr.* Michael Leib.

Read Feb. 3, 1788.

AN accurate knowledge of diſeaſes being eſſentially neceſſary towards the cure of them, I have thought the following caſe worthy your attention, as it may aſſiſt in characteriſing, with more preciſion, a diſorder which ſo often proves fatal, and which, till of late years, has been unknown to phyſicians—

And

And though mercury was insufficient to the cure of the present case, yet the unfortunate termination of it has convinced me, that the case I communicated to the college some time ago, which *was* cured by mercury, and whose leading symptoms corresponded exactly with the one I am going to relate, was really a case of Hydrocephalus internus. In this child's complaint mercury could not be said to have had a fair trial, from an unhappy opinion of the mother, that if he survived, he would be helpless, which occasioned a neglect in the due administration of that medicine—Indeed, when the difficulty of swallowing prevented the exhibition of calomel, mercurial friction was suspended for near two days. The disease, as in the former case, arose after a severe fall down stairs, which serves to strengthen the conjecture of Dr. Fothergill, that it may be occasioned by the rupture of a lymphatic in the brain.

JAMES BOLAND, aged two years and an half, of a delicate habit, was admitted to the care of the Diſpenſary, November 28th, 1788. About twelve days before his admiſſion he had a violent fall down ſtairs, which was attended with a ſmall contuſion of the forehead—A week after the fall he complained of indiſpoſition, and the fourth day of his illneſs was admitted as a diſpenſary patient, and had the following ſymptoms, viz. Great dilatation of the pupils, ſtrabiſmus, the cornea being ſcarcely perceptible, violent pain in the head, ſtupor, moaning, and when aſked what ailed him he would anſwer, *I am ſick*, and at the ſame time point to his head—grinding of his teeth, vomiting, a ſlow and unequal pulſe, not beating more than ſixty in a minute, were likewiſe among his ſymptoms —From the account which was given by his mother of his fall down ſtairs, I ſuſpected a depreſſion of the ſcull, but after the moſt attentive examination no injury was perceptible.

29th. I directed ſix grains of calomel to be given, as he had been coſtive for three or four days, and ordered a bliſter to the neck.—The calomel gave but a ſingle dejection.

30th. Symptoms the ſame, excepting a ceſſation of vomiting—a grain of calomel was exhibited every two hours, and mercurial friction was uſed to his thighs.

December 1ſt. Symptoms more unfavourable; irregularity of his pulſe more evident than before; a kind of ſpaſmodico-convulſive affection of one ſide, and a paralyſis of the other; ſtupor ſomewhat increaſed—the calomel was continued as before---he had three looſe black ſtools.

2d. Symptoms much worſe, ſlight convulſions, pulſe 80, and irregular; mercurius calcinatus was ſubſtituted for the calomel, and mercurial friction continued—he doſed all night.

3d. He was inſenſible to every object; pulſe 100—the calomel was again uſed.

4th. Stupor the ſame—he had a diſcharge of matter, of a pus like appearance, from the eyes, which had become immoveable, and had the veſſels of the tunica albuginea much diſtended with blood; his cheeks were ſwell-

ed, and he had a difficulty of deglutition---Pulſe regular with conſiderable action in it---he had a dark-coloured ſtool.

5th. An apparent alleviation of the diſeaſe, ſtrabiſmus leſs, pupils ſomewhat contracted, ſtupor abated, pulſe full and at an hundred, ſkin moiſt, bowels regular---he noticed objects, replied when ſpoken to, and ſwallowed ſome drink and calomel.

6th. Symptoms moderated, pulſe natural, bowels looſe, eyes much inflamed; he anſwered when I ſpoke to him.

7th. Every ſymptom more unfavourable, pulſe intermitting and tremulous; convulſions, with profuſe ſweat, which continued till death.

HAVING obtained permiſſion from the parents for my friend Dr. Wiſtar, and myſelf, to examine the body, we opened the head, and found the following appearances:

DIS-

DISSECTION.

Upon removing the cranium the blood-veſſels of the meninges appeared more diſtended than they uſually are; and there were ſeveral ſmall adheſions of the dura and pia mater to each other. The ſurface of the cerebrum was extremely moiſt—the colour of it's cortical ſubſtance was more pallid than uſual, and, upon cutting into it, there were very few of the red puncta which are ſometimes obſervable. All the ventricles were diſtended, with a clear watry fluid; each of the lateral ventricles contained at leaſt one ounce and a half of it, and the other two about an ounce.

VIII.

Account *of the* State *of the* Barometer.

M	B.	JANUARY, 1789.	W.
1	30.5	Clear day,	N. W.
2	30.5	Do.	N. W.
3	30.5	Do.	
4	30.5	Do.	
5	30.3	Do.	N.
6	30.3	Do.	W.
7	30.3	Do.	N. W.
8	30.3	Do.	
9	30.3	Do. very cold day.	
10	30.3	Slight ſnow.	N. W.
11	30.0	Clear day, little wind.	N. W.
12	30.0	Do. and ſevere froſt.	W.
13	29.5	A fall of ſnow.	N. E.
14	29.4	Cloudy, little wind.	W.
15	27.7	Clear, fine day.	W.
16	30.0	Do.	
17	29.5	Cloudy morning. P. M. clear.	W.
18	30.0	Clear fine day	W.
19	29.5	Cloudy, and little wind	W.
20	29.3	Foggy day and thaw	S.
21	29.7	Cloudy	W.
22	27.7	Snow, hail and ſleet	N. E.
23	30.4	Clear day	N. W.
24	30.0	Warm clear day	S.
25	29.5	Foggy, overcaſt ſky	E.
26	29.5	Fair morning. P. M. ſnow	E.
27	29.5	Rainy, cloudy day	E.
28	30.0	Overcaſt and moderate	N. E.
29	29.5	Do. little wind	S.
30	29.7	Do.	N.
31	29.7	A fall of ſnow	W.

M	B.	FEBRUARY, 1789.	W.
1	30.4	Severe frosty day	N. W.
2	30.5	Do.	W.
3	30.0	Fine pleasant day	S. W.
4	30.0	Hazy, overcast	N.
5	30.5	Clear cold day	N. W.
6	30.0	Overcast and cold	N.
7	30.4	Fine clear day	N. W.
8	29.7	Hazy and snow	S. E.
9	29.5	Variable weather	W.
10	30.0	Fine pleasant day	S. W.
11	30.0	Do.	
12	30.0	Do.	
13	30.0	Do. but colder	N. W.
14	30.0	Sharp frost	N. W.
15	30.0	Do.	
16	29.5	Snow	E.
17	30.0	Clear cold day	N. W.
18	30.0	Hazy, overcast	N. E.
19	30.0	Snow from	N. E.
20	30.0	Deep snow and clear	N. W.
21	30.0	Clear pleasant day	W.
22	29.7	Hazy foggy day	W.
23	29.7	Do.	
24	30.0	Clear cold day	N. W.
25	30.3	Extreme cold	N. W.
26	30.4	Do.	N. W.
27	30.0	Pleasant day	S. W.
28	30.0	Do.	E.

M	B.	MARCH, 1789.	W.
1	30.0	Fair pleaſant day - - -	S.
2	30.4	Do. and calm - -	
3	30.0	Heavy rain from - -	S.
4	30.0	Cold clear day, wind - -	N. W.
5	30.4	Do. - - -	N. W.
6	30.0	Overcaſt, heavy rain at night -	S.
7	29.5	Cloudy morn. P. M. clear -	N. W.
8	30.0	Fine clear day - - - -	N. W.
9	30.0	Do. - - -	S.
10	30.5	Do. - - -	
11	30.5	Do. - - -	
12	30.0	Overcaſt, and rain at night -	
13	30.0	Fair pleaſant day - -	W.
14	30.0	Do. - - -	W.
15	30.5	Do. - - -	W.
16	30.0	Cloudy - - -	S.
17	30.0	Fine clear day - -	E.
18	30.0	Do. - - -	E.
19	29.7	Do. heavy rain at night -	W.
20	30.0	Clear pleaſant day - -	W
21	30.0	Variable weather - -	E.
22	30.0	Clear day - - -	N. W.
23	30.0	Do. very cold - -	N. W.
24	30.0	Do. - - -	N. W
25	30.4	Sharp cold wind - -	N. E.
26	30.4	Do. - - -	
27	30.4	Warm fine day - -	
28	30.0	Rain and wind - -	S. E.
29	30.0	Clear day - - -	N. W.
30	29.5	Rainy day - - -	
31	29.5	Fair day - - -	N W.

M	B.	APRIL, 1789.	W.
1	30.0	Very variable - -	W.
2	30.0	Fair day - - -	N. W.
3	30.0	Do. - - -	W.
4	30.0	Do. - - -	
5	30.0	Do. - - -	
6	30.0	Rainy day - - -	S.
7	29.5	Fair and high wind - -	W.
8	29.5	Do. - - - -	
9	30.0	Overcaſt, little wind - -	S. E.
10	29.0	Violent guſts of rain - -	S. E.
11	29.5	High wind at - - -	W.
12	29.7	Cold Cloudy day - -	W.
13	30.0	Clear, cold at - -	W.
14	30.0	Fair day, wind - - -	S.
15	29.7	Do. - - -	S. W.
16	30.0	Do. little wind at - -	E.
17	30.0	Do. high wind - -	N. W.
18	30.0	Fair pleaſant day - - -	W.
19	30.0	Do. - - -	W.
20	30.0	Do. - - -	
21	29.4	Rain till 3 P. M. - -	E.
22	29.7	Fair day, wind - - -	N. W.
23	29.7	Hazy warm day - -	S. W.
24	29.3	Heavy rain from - - -	S. W.
25	29.5	Clear day, high wind - -	W.
26	29.5	Do. cold wind - - -	N.
27	29.5	Variable weather - -	
28	29.7	Cold day - - -	N. W.
29	29.7	Do. - - -	N. W.
30	29.7	Do. - - -	N. W.

M	B.	MAY, 1789.	W.
1	29.7	Clear pleaſant day	N.
2	29.5	Rainy day	E.
3	29.7	Fine warm day	S.
4	29.7	Overcaſt	E.
5	29.7	Variable weather	S.
6	30.0	Cold windy day	N. W.
7	30.0	Rainy morning	S.
8	29.7	Hazy cloudy weather	S.
9	30.0	Fine clear day	N. W.
10	30.0	Rainy day	S. E.
11	30.0	Hazy morning. P. M. fair	W.
12	30.0	Fair day, wind	S. W.
13	30.3	Do. little wind	E.
14	29.7	Rainy day	E.
15	29.7	Cold windy day	N. E.
16	29.7	Rainy morning. P. M. fair	W.
17	29.7	Clear warm day	W.
18	29.7	Do.	S. W.
19	29.7	Do.	S.
20	30.0	Hazy, overcaſt, and cold	S. W.
21	29.7	Rainy morning	S. W.
22	30.0	Clear cool day	N. W.
23	30.0	Fine pleaſant day	W.
24	30.0	Do.	
25	30.0	Rainy day, wind	S. W.
26	30.0	Clear pleaſant day	N.
27	30.0	Cloudy day, and cold wind	N. E.
28	30.0	Rainy morning	N. E.
29	30.0	Fair day	N. E.
30	30.0	Do. ſharp lightning and thunder	S. W.
31	30.0	Cloudy morning	E.

M	B.	JUNE, 1789.	W.
1	30.0	Fair pleaſant day	N.
2	30.0	Do.	N.
3	30.0	Do.	N. E.
4	30 0	Do.	N. E.
5	30.0	Rainy morning	S.
6	30.0	Fine pleaſant day	S. W.
7	30.0	Rain, thunder, and lightning	S. W.
8	30.0	Warm pleaſant day	S.
9	30.0	Do.	S.
10	30.0	Sultry over caſt weather	S.
11	29.7	Do.	S.
12	29.7	Fine pleaſant day	N. W.
13	29.7	Do.	W.
14	30.0	Do.	W.
15	30.0	Do.	W.
16	30.0	Do.	N. W.
17	30.0	Do.	W.
18	30.2	Do. very cool	N. W.
19	30.2	Pleaſant warm day	S.
20	29.7	Very warm. Guſt P. M.	W.
21	30.0	Do. and fair	S. W.
22	29.7	Do. and guſt P. M.	S. W.
23	29.7	Fine pleaſant day	W.
24	30.0	Cool fine day	N. W.
25	30.0	Do.	W.
26	30.0	Do.	
27	30.0	Do.	
28	30.0	Do. warm	S. E.
29	30.0	Do. with ſhowers, A. M.	S.
30	30.0	Fine pleaſant day	W.

M	B.	JULY, 1789.	W.
1	30.0	Warm clear day	S.
2	30.0	Do. guſt P. M.	S.
3	30.0	Do. and guſt	S.
4	30.0	Do.	S. W.
5	30.0	Do.	S. W.
6	30.0	Cool clear day	W.
7	30.0	Do.	N. W.
8	30.0	Clear, pleaſant	W.
9	30.0	Do. very warm	W.
10	30.0	Do. cool wind at	N. W.
11	30.0	Do.	
12	30.0	Rainy morning. P. M. clear	S. W.
13	30.0	Clear morning. P. M. guſt	N. W.
14	30.0	Clear cool day	
15	30.0	Do.	W.
16	30.0	Do.	W.
17	30.0	Do.	S. W.
18	30.0	Do.	W.
19	30.0	Do. rain at night	S. W.
20	30.0	Fine pleaſant day	S.
21	30.0	Do.	S. W.
22	30.0	Do.	S. W.
23	30.0	Do. very warm	S. W.
24	30.0	Do.	S. W.
25	30.0	Do. P. M. heavy guſt	N. E.
26	30.0	Fine clear day	N.
27	30.0	Do.	S. W.
28	30.0	Do. rain at night	
29	30.0	Do.	
30	30.0	Rainy day	N. E.
31	30.0	Overcaſt lowring day	E.

M	B.	AUGUST, 1789.	W.
1	30.0	Sultry damp weather	S. E.
2	30.0	Do. rain at night	S. E.
3	30.0	Heavy ſhowers	S.
4	30.0	Do. and very ſultry	S. E.
5	30.0	Do.	S. E.
6	30.0	Do.	S.
7	30.0	Do.	S.
8	30.0	Do.	
9	30.0	Very hot and ſultry	S.
10	30.0	Do. ſhower P. M.	S.
11	30.0	Do.	S. W.
12	29.7	Do.	
13	29.7	Do.	
14	29.7	Do.	
15	29.7	Do.	
16	29.7	Do. guſt P. M.	
17	29.7	Fine cool clear day	N. W.
18	30.0	Cloudy	N.
19	30.0	Do. and rain	N. E.
20	30.3	Warm clear day	S. W.
21	30.3	Do.	
22	30.3	Cool clear day	N. E.
23	30.0	Do.	E.
24	30.0	Do.	E.
25	30.0	Warm fine day	E.
26	30.0	Do.	
27	29.7	Do. very warm	S.
28	29.7	Fine pleaſant day	
29	29.7	Do. wind freſh	W.
30	30.0	Do. ſhower at noon	W.
31	30.0	Very cool clear day	N. W.

M	B.	SEPTEMBER, 1789.	W.
1	29.5	Cloudy	W.
2	29.5	Pleaſant warm day	S. W.
3	29.5	Do.	S. W.
4	30.0	Clear cold day	N. W.
5	30.0	Do.	N. W.
6	30.0	Do.	N.
7	30.2	Clear pleaſant day	N. E.
8	30.3	Do.	E.
9	30.3	Do.	E.
10	30.3	Do.	
11	30.0	Do.	
12	30.0	Rainy, hazy	E.
13	30.0	Hazy	S. E.
14	30.0	Fair	E.
15	29.7	Rainy	E.
16	29.7	Fair	
17	29.7	Hard Rain	E.
18	30.0	Fair	N. W.
19	30.3	Do.	W.
20	30.3	Do.	W.
21	30.3	Do. very warm	W.
22	30.0	Do.	W.
23	30.0	Do.	
24	30.0	Do.	S. W.
25	30.0	Do.	
26	30.0	Do.	
27	30.0	Do. and ſlight rain	N.
28	30 0	Do.	N.
29	30.0	Fair	
30	30.0	Do.	

M	B.	OCTOBER, 1789.	W.
1	30.0	Fair	N. W.
2	30.0	Do. very cool	N. W.
3	30.0	Hazy, overcaſt	S. E.
4	30.0	Do. ſlight ſhowers	S. E.
5	30.0	Fair	N. W.
6	30.0	Do.	W.
7	30.0	Do.	W.
8	30 0	Do.	S. W.
9	30.0	Do.	S. W.
10	30.0	Clear cold wind	N. W.
11	30.0	Do.	N.
12	30.0	Do.	N.
13	29.4	Do. warmer	S. W.
14	29.4	Do.	S. W.
15	29.4	Do.	W.
16	29.4	Do.	W.
17	29.4	Do.	
18	29.4	Do.	
19	30.0	Do.	N.
20	30.0	Do.	S. W.
21	30.0	Slight rain	W.
22	30.0	Clear	W.
23	30.5	Do.	E.
24	30.0	Rain P. M.	S. E.
25	30.3	Fair	W.
26	30.0	Guſt P. M.	W.
27	29.5	Cloudy	W.
28	30.0	Fair	W.
29	30.0	Overcaſt	E.
30	29.7	Clear	N. W.
31	30.0	Do. and pleaſant	S.

M	B.	NOVEMBER, 1789.	W.
1	30.c	Clear pleaſant calm	
2	30.c	Do.	
3	29.	Rainy day and ſnow	W.
4	30.c	Clear, cold	W.
5	30.o	Do. and windy	W.
6	30.c	Do. pleaſant	W.
7	30.o	Do. rain at night	S.
8	30.3	Clear pleaſant day	E.
9	30.c	Foggy,	S.
10	30.o	Do. morning	S.
11	30.o	Fair warm day	S.
12	30.c	Do. foggy morning	S.
13	30.c	Do. till noon calm	
14	30.o	Do.	
15	30.o	Do.	
16	30.o	Do.	
17	30.3	Clear cool day	N. W.
18	30.7	Do. ſharp froſt	N. W.
19	30.3	Do. moderated	N. W.
20	30.o	Cloudy	S. W.
21	30.o	Rainy day	S. W.
22	29.5	Do. and foggy	S. W.
23	30.o	Clear, windy at	N. W.
24	30.o	Do. and calm	
25	30.o	Cloudy	E.
26	29.3	Storm of rain and wind	E.
27	29.5	Cloudy overcaſt	N. E.
28	30.o	Do.	
29	29.5	Do.	
30	29.5	Do.	

M	B.	DECEMBER, 1789.	W.
1	29.5	Clear, cold, and windy	N. W
2	30.0	Do.	
3	30.0	Do.	
4	30.0	Do. warmer	W.
5	30.0	Do. light ſnow	W.
6	30.0	Fine pleaſant day	S.
7	30.0	Foggy, warm	S.
8	30.0	Clear day	W.
9	30.0	Do. very pleaſant	W.
10	30.0	Do.	S. W.
11	30.0	Rainy day	N.
12	30.0	Clear	W.
13	30.0	Do.	W.
14	30.4	Do. ſharp froſt	W.
15	30.0	Clear and moderate	W.
16	30.0	Rainy day	E.
17	30.0	Do.	N. E.
18	30.0	P. M. clear	W.
19	30.0	Clear day	W.
20	30.0	Sharp froſt	N. W.
21	30.0	Snow	W.
22	30.5	Fair and moderate	N.
23	30.3	Do.	N.
24	30.0	Snow and rain. P. M. clear	S.
25	30.0	Fair pleaſant day	W.
26	30.0	Do.	
27	30.0	Rain and thick fog	S.
28	30.0	Foggy day	E.
29	30.0	Fair fine day	W.
30	29.7	Rainy	S. E.
31	29.7	Cloudy overcaſt	S. E.

IX.

An account of a ſingular caſe of Iſchuria, in a young Woman, which continued for more than three years: during which time, if her urine was not drawn off with the catheter, ſhe frequently voided it by vomiting; and for the laſt 20 months, paſſed much gravel by the catheter, as well as by vomiting, when the uſe of that inſtrument was omitted, or unſucceſsfully applied. To which are annexed ſome Remarks and Phyſiological Obſervations. By Iſaac Senter, *M. D. aſſociate member of the College of Phyſicians of Philadelphia, and Senior Surgeon in the late American Army. Read January* 5, 1790.

LUCY FOSTER, aged fifteen years, a fleſhy, healthy looking, well proportioned young woman, was taken June 1ſt, 1785, with a pain in the left *Hypochondrium*, accompanied with cough, fever, oppreſſion at her breaſt, and difficulty of breathing.

BEING in very poor circumſtances, her friends neglected aſking advice till about a fortnight from her firſt ſeizure, when I was called to her aſſiſtance.

I WAS informed by her mother that ſhe became a woman at thirteen, and continued pretty regular in her menſes, till within five weeks of her preſent illneſs; and that from her ſeeing nothing during that period, ſhe ſuppoſed her to have taken a bad cold, as ſhe was very inattentive to her health, and had been obliged to do the duty of a ſervant maid in a family at the other end of the town.

HER pulſe was upwards of 100 in a minute, her tongue coated with that ſort of fur which often accompanies a bad kind of chronic inflammation of the thoracic viſcera.

I TOOK ten ounces of blood from her arm, gave her an emetic, and directed an epiſpaſtic of flies to the affected ſide. The blood when cool, heft up its coagulable lymph as is common in pneumonic inflammation; but the buff was tender, and the craſſamentum and

ſerum did not ſeparate, as is uſual in caſes of acute inflammation of the breaſt.

Expectorant febrifuge mixtures were given her with emollient ptyſans of barley water, &c. and another bliſter applied to her ſide within a few days. Theſe medicines produced an abatement of the ſymptoms, and in the courſe of three weeks, I ceaſed to viſit her. I however looked upon her diſeaſe to have a ſtrong tendency to a conſumption: and about the fourth week from my firſt viſiting her, ſhe vomited up a quantity of bloody pus, of a very diſagreeable kind, which with the preceding ſymptoms, induced me to think a vomica had burſt in her ſtomach; for during the whole of this illneſs from my firſt ſeeing her, her ſtomach was ſo irritable, that it was with much difficulty, that either food or medicine could be made to ſit upon it; and ſhe often vomited up the moſt ſimple barley drink.

She had a ſuppreſſion of urine for twenty-four hours, but did not get any aid from medicine, as nature relieved herſelf. She, however,

ever, became regular in her menſes, and recovered ſo far in about two months, as to return to her uſual labour, and continued capable of doing her duty to the ſatisfaction of her employers, till the June following, 1786. On the third of this month, I was deſired to viſit her again, when I found all her old complaints (except the ſuppreſſion of her menſes), returned with greater ſeverity than they appeared the laſt year.

She was now let blood, and treated in other reſpects as before: her diſtreſs continuing ſo great, that I found it neceſſary to repeat the operation, (drawing ſmall quantities) ſeveral times, as nothing elſe appeared to afford her any conſiderable relief. Her tongue was covered with a yellowiſh coat in the middle, and a muſlin colour at the edges; her pulſe beat 120 ſtrokes in a minute.

The irritability of her ſtomach was ſo great, that it had become extremely difficult to give any article either of medicine or nouriſhment, but what ſhe vomited up immediately. The effervescent draughts, infuſions

of Columbo, with ſpirits of ſweet nitre and ſweet vitriol, liq. anod. min. &c. were tried without any laſting effect. Opium gave the moſt permanent relief, and afforded her that refeſhment from ſleep, which ſhe could obtain by no other means.

As I now looked upon her caſe to be of long continuance, and reſiding in a diſtant part of the town, I called but ſeldom, after the ſeverity of her ſymptoms had ſubſided; which they did in about three weeks.

On the 2nd of July, ſhe was ſeized with a total ſuppreſſion of urine, without any perceptible cauſe, which continued five days, not being able to void a ſingle drop; and notwithſtanding her pain and diſtreſs were very great, ſhe did not let her circumſtances be fully known to her friends, for fear of having it drawn off with an inſtrument.

The beginning of the ſixth day, ſhe was taken with a vomiting, which laſted till ſhe brought up nothing but water, which, ſhe ſaid, taſted in every reſpect like urine.

As

As her vomiting continued, ſhe found relief in the bottom of her belly, from the ſwelling and great ſoreneſs ſhe had felt for ſeveral days.

SHE now thought herſelf much better, but her vomiting recurred the next day, as I was informed, and continued more or leſs every day till I ſaw her, which was on the 14th of the month.

As ſhe had diſcharged from her ſtomach every thing ſhe ate or drank, from the time of her firſt vomiting till this, ſhe did not ſuffer ſo much from the Iſchury, which ſtill continued, as ſhe did before the firſt evacuation. I prevailed upon her to let me paſs the catheter into the bladder, whence I drew about three pints of urine, clear, but high-coloured; her ſtrength was very much exhauſted, and ſhe felt great heat and ſoreneſs throughout the abdominal viſcera.

A VARIETY of medicines were preſcribed, and every method purſued that could be thought of to allay the extreme irritability of her

her ſtomach, and reſtore the natural action of the bladder.

For ten weeks ſucceſſively, ſhe was incapable of retaining in her ſtomach either food or medicines, except opium ; this was her only ſolace by day as well as night.

From this time to December, ſhe continued with very little abatement of her diſtreſs, or alteration of her circumſtances. And as ſhe could lie in no other poſition, ſhe was conſtantly ſupported in an armed chair, in a reclined poſture, with pillows under her hips.

Whenever I omitted to draw off her water once in 30 or 36 hours at fartheſt, ſhe never failed to vomit it up. To aſcertain ſo extraordinary a fact beyond the poſſibility of a miſtake on my part, or a deception on hers, I often viſited her about the time I knew ſhe muſt vomit if the catheter was not introduced ; and I examined her bladder, found it full, hard, and tender ; and ſat by her till the vomiting recurred, ſaved the water that ſhe brought up this way, and compared

pared it with what I drew off, and found it the ſame in every reſpect.

During the time her urine came off by vomiting, ſhe ſuffered extreme anxiety, and always complained of great heat, ſmarting, extreme thirſt, and a ſenſation of inverſion or turning up of ſomething (running, as ſhe expreſſed it) that appeared to tear her bowels.

As the affair had become ſo lengthy, and my buſineſs was ſuch that it was not in my power to attend upon her as often as her caſe required, I inſtructed the young gentlemen who lived with me, in the uſe of the catheter, and they waited on her in my abſence as often as they could conveniently.

In the month of January 1787, from ſome cauſe unknown ſhe could not be relieved with the inſtrument, nor could ſhe vomit up her urine for ſeveral days; when it paſſed off by the *navel*, for three days ſucceſſively; after which, the catheter was uſed with the ſame effect as before.

From

FROM this time, to the Auguſt following, there was ſo great a ſameneſs in her complaints, that nothing occurred worth noticing. About the beginning of this month, a *brick-coloured gravel* began to paſs off through the catheter, and ſoon became ſo large and plentiful, that neither urine or gravel could be completely evacuated by the inſtrument in its uſual form. I had one made of a different conſtruction, open at two of the ſides for about half an inch, which anſwered my wiſhes.

SHE continued to diſcharge gravel this way, whenever her urine was drawn off, till the beginning of November, at which time ſhe felt more diſtreſs than uſual, whenever her urine came off by vomiting, and ſhe ſoon obſerved a *gritty ſubſtance* in her mouth. When I was informed of this new phenomenon, I requeſted her to ſave the urine for my inſpection, the next time ſhe vomited. I compared this with what I drew off, and found it contained the ſame kind of *gravel* as that which paſſed the catheter. I procured and ſaved ſeveral drachms of this gravel, that came from her both by the inſtrument and by

by vomiting, and could obſerve no difference either in the colour or conſiſtence of them.

From this period to the ſummer 1788, her complaints continued much the ſame. When her water was not drawn off, ſhe always brought it up by vomiting, commonly attended with great pain in the head. During this ſummer, ſhe twice paſſed a ſmall quantity of urine, through the urethra, in conſequence of being frightened, once by thunder, and the ſecond time by the falling of a window in her room. This ſerved only to raiſe her ſpirits for a few days, with the expectation of her urine returning through its natural channel. Her caſe, however, continued the ſame in that reſpect, and grew every day more complicated in others. The *hypogaſtrium* became more tumid and tender, and her bladder appeared very much thickened, and extremely ſore, even after it was evacuated. Add to this, the apparent inequality of the ſurface of the bladder, was ſo great, and the tumour ſhifting ſometimes towards the right, and at others to the left inguen according as her body was moved, that I began ſtrongly to ſuſpect a ſtone.

Through

THROUGH the month of September, her urine could very rarely be drawn off; for upon the introduction of the catheter, a ſpaſm ſeized the urethra and neck of the bladder, and though the inſtrument appeared to paſs high up into the fundus of the bladder, not more than a gill could be drawn, before it ſtopped entirely, with a ſenſation of ſomething falling down againſt its cervix, which ſhe was very confident was a *ſtone*.

IN the courſe of this month ſhe vomited more ſand than ſhe had at any time before, and failed in ſtrength and ſpirits ſo faſt, that I was apprehenſive ſhe would not live the month out. Her urethra, bladder, and external genital parts, were ſo extremely ſore, that, for ſome time, it prevented my ſearching her for the ſtone in the manner I intended.

ABOUT the beginning of October, I was able to introduce the ſound, when I readily met with a ſtone, which appeared of a ſmall ſize, and rather ſofter than urinary calculi commonly are. I repeated the examination a number of times, till I was perfectly ſatisfied that this was the caſe.

SHE

She would readily have undergone the operation of Lithotomy; but I told her no lasting advantage could be expected from it, while her viscera continued in such a diseased condition. During this month, her urine could be drawn off but part of the time; and she vomited it up for more than a week, without the possibility of any relief from the instrument, notwithstanding it was kept in the bladder sometimes during the whole night.

She had, at different seasons of the year, several ill-conditioned small abscesses in her arm pits, and on other parts of her body; but they did not appear to benefit her general complaints. She also voided at different times, by vomiting, (after she had thrown up all her urine), a *bloody pus*, of a very disagreeable appearance and coppery taste.

As her case was so very uncommon, I, at different periods of it, requested the advice of most of the faculty of this town. She was visited by the late Dr. Fletcher, Drs. Olyphant and Mason, the last of these gentlemen frequently attended her, both with me and in my absence, repeatedly relieved her by the catheter,

catheter, and ſaw her vomit up both urine and gravel. She was alſo viſited tranſiently by Dr. Waterhouſe of Cambridge, and ſeveral other phyſicians of eminence, who belonged out of the ſtate.

During the remainder of the fall, and principal part of the winter enſuing, the ſame troubleſome ſenſation of the falling down of a ſtone in the bladder, upon the uſe of the catheter, continued, and induced the moſt excruciating pain and miſery imaginable.

She was put into different poſitions, when the catheter was introduced, and I gave the inſtrument various directions in the bladder, ſometimes with ſucceſs, at others without. Her bowels, for the moſt part, were much leſs conſtipated than could have been expected, conſidering the frequency of vomiting, her ſupine ſituation, and the little nouriſhment ſhe was able to retain upon her ſtomach: And during the whole of her diſeaſe, till within three months of her death, the catamenia were irregular. Sometimes they appeared every fortnight, and at others, ſhe

paſſed

paſſed the regular period for that evacuation two or three months, without having any; but it did not appear to me that her diſeaſe was much influenced by either.

She had, by times, a dry cough, with the return of the old pain in the ſide; but ſhe never expectorated, by coughing, any kind of purulent matter, that could induce me to ſuppoſe her lungs were conſiderably diſeaſed. The bloody matter that ſhe brought up, always came by *vomiting*, preceded by a more morbid than ordinarily irritability of the ſtomach, ſoreneſs, and extreme anxiety.

Early in the ſpring 1789, her urine began to paſs *per anum*, loaded with the ſame kind of gravel that had come away by the catheter. This gave her ſome reſpite with reſpect to her vomiting, though ſhe continued to throw up more or leſs urine as well as gravel that way every week.

This new courſe of her water gave her a very troubleſome *teneſmus*; but the ſtone in the bladder, as well as the pain and diſagreeableneſs ariſing from the ſenſation of its deſcent,

ſcent, became daily leſs fatiguing. Her ſtrength and ſpirits decayed faſt, and the fever that ſhe had before continually laboured under, grew more completely hectical.

After the 13th of May, her bladder never became ſo much diſtended with urine as it had been before; and both this, and the gravel, now generally paſſed her once in twenty-four hours, either by vomiting or purging. She, however, introduced the catheter herſelf, and ſometimes drew off her urine to the quantity of a gill.

The ſecretion of urine, as well as the formation of calculi, evidently diminiſhed, in proportion to her loſs of ſtrength, and the increaſe of the diarrhœa. The menſes entirely ceaſed.

During the latter part of ſpring and ſummer, ſhe became quite paralytic at times; the frequency of vomiting increaſed, and ſhe had ſeveral convulſion fits after vomiting. She grew more and more emaciated; her convulſions returned more frequently; her fever

was

was more putrid; ſhe at laſt became lethargic; and on the 11th of Auguſt, death, which ſhe had long and ardently wiſhed for, put a period to a ſeries of the moſt complicated and ſingular miſery that I have ever ſeen ſince my acquaintance with diſeaſe.

THE next day after her death, I obtained leave to examine her body; when there were preſent, Drs. Waterhouſe and Maſon.

THE weather being very warm, there was ſuch a fœtor proceeding from the corpſe, that the family thought fit to inter it ſo ſoon, that we had not time to make our examination ſo minute as we wiſhed. We found much leſs ravage in the viſcera than was expected.

Thorax. IN this cavity there was nothing appeared unnatural, except a conſiderable adheſion of the right lobe of the lungs to the pleura.

Abdomen. THE omentum was principally waſted, but not more than is commonly the caſe with thoſe who die tabid. It was, however,

however, of a dark gangrenous colour pretty generally.

Stomach. THIS appeared very much changed from its natural colour, and in a gangrenous ſtate, containing a ſemi-purulent matter of a fœtid ſcent.

Liver and Gall bladder. THERE were no preternatural adheſions of the former, nor gall ſtones in the latter; and their colour, &c. not unuſual.

Inteſtines. IN theſe there were no ruptures either of their muſcular coats, blood-veſſels, or lymphatics, that we could diſcover. The villous coat was much deſtroyed, and the colour of the inteſtines darker than is common, except the *duodenum*, which was very much diſcoloured with the bile.

Kidneys and Ureters. IN theſe there was no conſiderable deviation from a ſtate of ſoundneſs; they were lax or flabby, but no rupture of any of their veſſels, or any calculi diſcoverable.

Urinary Bladder. THIS was in its natural ſituation not the leaſt thickened, had no ſand or gravel in it, nor did it adhere preternaturally to any of the circumjacent parts; and the muſcular ſphincter of its neck yielded readily to the introduction of the finger from the bladder into the urethra.

Uterus. IN its cavity was contained about a drachm of thick, darkiſh, fœtid pus; but no other appearance of diſeaſe in its body.

Tubæ Fallopianæ. WERE larger than common in virgins, and ſtrung with ſeveral *hydatids*, or *veſiculæ*, the ſize of a walnut, filled with a watery glutinous humour.

Corpora Fimbriata. Had a gangrenous appearance.

Ovaria. WERE enlarged to the ſize of a ſmall hen's egg, and contained a conſiderable quantity of a clear limpid fluid immediately under the firſt coat.

IN the hiſtory of a complaint ſo lengthy as this, where there is nothing new occurs

for many days or weeks, to enter into the minute detail of a diary, would not only exhauſt the patience of the reader, but far exceed the bounds commonly preſcribed to papers of this kind. I have endeavoured to exhibit all the principal phenomena attending this uncommon caſe, from the original minutes which I kept, in as ſimple a manner as the nature of it would admit.

In order to elucidate the caſe more ſatisfactorily to thoſe readers, whoſe circumſtances, perhaps, have not afforded them an opportunity of becoming acquainted with the late diſcoveries and improvements in the knowledge of the *lymphatic ſyſtem*, or in thoſe diſeaſes, either ariſing from, or accompanied with, a retrograde motion of the fluids in the human body; I hope it may not be thought improper to cloſe this paper with ſome obſervations upon theſe ſubjects, as well as ſome others connected with the caſe in queſtion.

But before I proceed to this, it ought not to be forgotten, that this young woman, when a child, was ſo unfortunate as to have a quantity of boiling water fall on her body,

by

by which the greater part of the left *hypochondrium* was ſo deeply ſcalded, that her life was deſpaired of for ſeveral days. How far this might operate towards laying a foundation for the pain and diſtreſs which ſhe ſuffered in this ſide for ſuch a length of time, I cannot determine.

As the *acmè* of life approached, the ſubjacent veſſels of that ſide might not evolve in the ſame ratio with the reſt, or their condition might perhaps be otherwiſe altered, ſo as to embarraſs the powers of circulation and reſpiration; but the figure of her cheſt was not perceptibly injured, though the cicatrix occaſioned by the ſcald was large and deep.

An Iſchuria ariſing from almoſt any cauſe, is a diſeaſe, in general, not only extremely painful,* in its advanced ſtages, but juſtly looked upon as one of a very alarming nature.

* *Tiberius, the Roman Emperor*, was not ignorant of the torture ariſing from a ſuppreſſion of urine; ſince we are told that he uſed to tie up the urethra, in thoſe whom he hated moſt; after firſt obliging them to drink largely of water.

THE cauſes of a preternatural retention of urine are various. It has been conſidered as ariſing 1ſt. From atony in the muſcular fibres of the body of the bladder, depriving it of the natural power of contraction. 2nd. From a paralytic ſtate of that organ; in which caſe the natural ſtimulus of the urine is incapable of producing its uſual effect, while ſuch inſenſibility remains. 3d. From inflammation or ſpaſm of the muſcular faſciculi which ſurround the opening of the bladder into the urethra. 4th. From the urinary canal leading from the bladder, being rendered incapable of dilatation, by inflammation, ſpaſm, ſtricture or preſſure. 5th. From an extraneous body, as a ſtone lying upon the orifice of the bladder, or lodged in the urethra. 6th. From laceration or burſting of the coats of the bladder.

SAUVAGES, with his uſual minuteneſs, has divided this complaint into no leſs than 44 ſpecies. The one that fell to the lot of this poor unhappy girl was undoubtedly what he calls the *Iſchuria veſicalis paralytica.* And whatever might have been the cauſe of this unhappy ſtate of the bladder, it could not be

ſo

ſo clearly aſcertained in the hiſtory of her caſe as I could have wiſhed. It does not, however, admit of a doubt, that the contractile power of her bladder was not ſufficient to overcome the reſiſtance of the ſphincter of its neck. Had the catheter been uſed before the paralytic affection of this viſcus took place, the energy of the *extruſores urinæ* would, in all probability, have been reſtored, and the retrograde courſe of her urine been prevented.

THAT of the hiſtory of this caſe which may appear the moſt ſurpriſing, is the extraordinary *outlets* that nature found for the evacuation of the urine. And it may very naturally be aſked, how is it poſſible that this perſon ſhould diſcharge ſuch large quantities of urine by vomiting and by ſtool for the ſpace of three years, and even gravel for a conſiderable part of that that time; yet upon the examination of the viſcera, no breach of the bladder or any part of the alimentary canal could be diſcovered? But however extraordinary this may appear to thoſe who have been led to conclude, that there is no other way for fluids to paſs from the ſtomach into the bladder, and *vice verſa*, but by the arterial circulation; ſtill facts are of too ſtubborn a nature

nature to bend to the ſyſtems of the moſt ingenious theoriſts. To the truth of this remark, phyſicians and ſurgeons of extenſive practice, who have united reading, reaſoning, and obſervation, can teſtify.

At every period of the healing art there have been thoſe who were firmly perſuaded, that there was ſuch a connection between the ſtomach and the bladder, as that in certain conditions of the human body, fluids would paſs from the former to the latter, without entering the common courſe of ſanguiferous circulation. But the circumſtances neceſſary to aſcertain the fact, were reſerved for thoſe of the preſent century to diſcover.

Mr. Hewſon and ſome other ingenious modern phyſiologiſts, have demonſtrated, that the urinary lymphatics are joined with the inteſtinal abſorbents, by numerous ſtomatomoſes. This being known as an anatomical truth, the conjectures of the ancients in this reſpect appear well founded. And although fluids paſſing from the ſtomach into the bladder, by the urinary branches of the lymphatics, muſt in all probability, invert the common

mon order of their valvular mechaniſm, yet it is well known, that this is not the only inſtance of ſuch an inverſion taking place in the other parts of our ſyſtem, under particular circumſtances and conditions of our bodies, by a retrograde motion of their contents.

WERE it not for fear of ſwelling theſe obſervations to an unwarrantable length, I could not refrain from quoting the judicious, ſcientific and concluſive experiments of Mr. *Darwine* upon this ſubject, as well as thoſe of *M. Macquire* in his *Dictionary of Chemiſtry*, under the article *urine*, to prove not only the exiſtence of ſuch a direct communication between the alimentary canal and the urinary bladder, but alſo to ſhew that many ſubſtances paſs from the ſtomach to the *veſica urinaria*, without undergoing any conſiderable alteration in the nature of their peculiar properties.

THE exiſtence of ſuch a vaſcular connection between the alimentary canal and urinary bladder being admitted, and the certainty of fluids paſſing in particular circumſtances from the former to the latter *in rectiſſimo curſu*, being

ing no longer problematical; it may ſtill be thought doubtful by ſome, whether the urine in the bladder can poſſibly aſcend into the ſtomach, though water in this viſcus may deſcend into the other.

It has not eſcaped the obſervation of phyſicians in every period of the healing art, that patients labouring under an Iſchury, have been known to paſs their urine off through the pores of their ſkin *. And there are ſome inſtances

* A Fiſherman belonging to this town, 55 years old, after being much fatigued with labour, until he became quite ſweaty, in the month of November, and expoſed in the water immediately after, was taken with a ſuppreſſion of urine, for which he was directed to take ſome purging ſalts and mercurial pills. I was deſired to attend him, but could not till the 4th day of his diſeaſe. I found his complaint ſo very preſſing, that after he was bled, and had an anodyne oleaginous clyſter without relief. I introduced the catheter and took from him a large quantity of high coloured urine, by which he was immediately made eaſy. The cauſe not being removed, his urine began to accumulate ſo faſt, that, by the next day it became troubleſome. I ordered him a ſaline diuretic mixture, and attempted to paſs a bougie into his bladder, but was foiled; I tried different ſizes ineffectually. Gentle cathartic medicines, with a repetition of the anodyne injections were uſed, but his complaint continued obſtinate

On

inſtances upon medical record, of a ptyaliſm coming on in conſequence of retained urine in the body.

DR.

On the 4th day from the commencement of this laſt accumulation, his fever was very high, had much thirſt, and complained of great pain in his head. I took more blood from him, which was very buffy, and continued the ſeveral medicines before in uſe. I tried again the bougies and catheter without effect; he was put into warm water, and after it cold water was thrown on his extremities; but not a drop of urine could be produced. Upon the 5th he was more ſwelled; he was put into the bath again, and a variety of other means were uſed. His brain was now evidently affected. He dozed much; a *urinous ſweat* came out upon him plentifully. Upon the 6th he was ſeized with a vomiting which continued till night with very little intermiſſion. His caſe now ſeemed deſperate, as death appeared to be faſt approaching. I let him more blood, and directed him again into the bath, with a determination, if he ſhould not be relieved by this, to puncture the bladder without delay. While in the bath, he was ſeized with a *liepothymia*, and in this condition carried to bed. His urine now began to flow, though inſenſibly to himſelf. He ſweat much, continued to have fainting fits, and vomited, by ſpells, through the night. By the morning the ſpaſm was ſo far overcome in the neck of the bladder, that he was out of pain, though not freed from all his urine. It however continued to flow, and his bladder ſlowly recovered its expulſive power, till he was entirely well.

Dr. Daniel, in the Medical Communications, Vol. I. relates a case of a woman, who had a *ptyalism*, apparently occasioned by a diminished secretion of urine, cured by diluted draughts of alkaline salts. And Mr. Warner, in his judicious collection of cases in Surgery, has recorded the extraordinary case of a young woman, who, in attempting to raise a weight above her strength, was taken with a pain in the small of her back, accompanied with a total suppression of urine, which continued five days, notwithstanding the most judicious means were used to remove it. Upon the 5th, she was relieved by the introduction of the catheter. During this suppression she was seized with an acute fever, and for eighteen or twenty hours before her urine was drawn off, she discharged by the mouth, a great quantity of saltish water, tinged with blood, which, upon lying down, flowed in so great quantities as to threaten suffocation. Upon this case, Mr. Warner, contrary to his general method, makes no remarks; he does not even conjecture how this saltish water could come from the bladder to the mouth. This girl remained for near

near three years, without paſſing any water but by the aſſiſtance of the catheter. She was finally cured by dividing the urethra, and taking, by ligature, out of the neck of the bladder an excreſcence the ſize of a turkey's egg.

While writing this, I have the care of a black girl more than 20 years of age, who has for near two years been troubled with a variety of diſtreſſing ſenſations, which appear to ariſe from polypus concretions in the heart and large blood veſſels. She firſt complained of pain deep in the thorax, extending down the right ſide into the liver. Her pulſe was ſlow, *unequal*, and *intermitting*; and upon motion ſhe frequently complained of faintneſs, ſhortneſs of breath, and palpitation of the heart. He tongue was generally foul, had but little appetite, and was ſubject to coſtiveneſs. But, till within about three months, by ſmall bleedings, epiſpaſtics, and eccoprotics, joined to a cooling laxative diet, ſhe was enabled to keep about houſe the moſt of the time. For the three months laſt paſt, all theſe ſymptoms increaſed, and induced a multiplicity of others. She at ſundry

dry times had a paucity of urine followed by a *ptyaliſm.* Theſe, however, appeared to give way to the remedies that were uſed, till within about ſix weeks paſt; when ſhe was ſeized with a total ſuppreſſion, which laſted eight days, followed with a vomiting and pytaliſm. During all this time, her bladder was not ſo much diſtended as to make the *hypogaſtrium* tenſe, or tender to the touch. I however drew off above two pints of water, with the catheter, which was neither high coloured nor fœtid. She now ſeldom paſſes her urine oftener than once in three or four days, and then not in conſiderable quantities. She ſpits nearly three pints of a ſaltiſh water mixed with phlegm, every 24 hours, vomits more or leſs every day, a brackiſh pituit, and has nothing paſs her bowels, without aſſiſtance. In her ſevereſt paroxyſms of diſtreſs ſhe is extremely agitated with tremors, ſubſultus tendinum, vomiting and convulſions, accompanied with ſuch a furious delirium, that the family are obliged to confine her with cords. She froths and foams at the mouth, like the ancient Dæmoniacs; and what is peculiarly ſingular and worthy of remarking, is, in her moſt violent agonies, *her pulſe*

pulſe loſe entirely the intermiſſion and inequality that they always have at the intervals of her greateſt eaſe and tranquillity. They are, however, generally quick and ſmall. She has very frequently a *ſcotomia*, pain in her head and eyes, and indeed in every part of her body, but more eſpecially in her back and lumbar regions; and in proportion to the diminiſhed diſcharge of urine, her vomiting, ptyaliſm, and univerſal diſtreſs are increaſed. She has frequent returns of a diſtention, ſoreneſs, and pulſation in the external iliac artery of the right ſide, which extends down the thigh. Whether this ptyaliſm was occaſioned by a diminiſhed ſecretion of urine in the kidneys, or from the retention of it in the bladder, is very uncertain. The pain in her back and loins has been very conſtant for many weeks, and ſhe did not appear to ſuffer as much from retained urine in the bladder as might be expected, conſidering that ſhe ſo ſeldom voids it in the natural way. It, however, does admit of a doubt that the diſcharge of her ſtomach and fauces are urinous.

When nature is hardly puſhed, ſhe has many reſources that a mere knowledge of the anato-

anatomical ſtructure of our bodies, as far as it has been inveſtigated, has not been able to diſcover to us. And though ſhe often makes uſe of ſuch violent means to free herſelf of diſeaſe, as to deſtroy the exiſtence of the *vital principle itſelf*, yet we are often aſtoniſhed with recoveries that the moſt cautious prognoſticators had deemed impoſſible.

WHETHER, in theſe caſes, the urine paſſes back into the ſyſtem by percolation, or inverts the courſe of circulation in the urinary lymphatics, may be matter of doubt with many, though I am decidedly of the latter opinion, from what I have obſerved in more caſes than one of this kind. In the above related caſe of L. F. I never could diſcover the leaſt ſmell of urine in either her ſweat or perſpiration.

EVERY circumſtance conſidered in this caſe, it appears to me beyond even a doubt, that the retrograde courſe of the urine was through the lymphatics into the inteſtines and ſtomach; that when it went into the former, it ſoon excited a paſſage downwards; and when it could find none in either of theſe

theſe ways (as was the caſe for three days) it forced one through the *urachus* out at the navel; nor does our not being able, (from the haſty manner in which we were obliged to conduct our examination) to diſcover theſe paſſages in a ſtate of enlargement, amount to any proof to the contrary; ſince it is well known, that in dead bodies ſuch an alteration ſoon takes place in the veſſels by collapſe and otherwiſe, as often to defeat a much more advantageous opportunity for the diſcovery of diſeaſe.

FEW phyſicians of experience and obſervation but muſt have noticed inſtances of partial, ſudden, and extraordinary actions of the veſſels in caſes which have fallen under their care; ſuch as the tranſlation of the matter, of chyle, of milk, &c. and mention is frequently made of them in books of medicine. But I do not remember an inſtance on record, of a caſe exactly ſimilar to that which is the ſubject of this article.

THAT which comes the neareſt to it of any within my preſent recollection, is one taken notice of by Dr. Percival in his 2d Vol.

of a woman with an encyſted dropſy of the left *ovarium*, who, after a ſpontaneous vomiting of ſeveral days, during which ſhe brought up three gallons of water, was entirely cured, by this diſcharge, of a dropſy that was before looked upon as incurable.

ANOTHER caſe of the extraordinary energy of the abſorbing lymphatics, is recorded by Dr. Simpſon, of a young man who was ſeized with a fever, to which a diarrhœa ſucceeded, with an extreme ſtupor. He would drink nothing to allay his thirſt, though burning up with the violent heat. He ordered his feet to be immerſed in warm water, which being done, he (the Doctor) ſuddenly perceived a ſurpriſing decreaſe of the water in the veſſels, abſorbed by his feet, and poured out again *per anum* like a cataract.

ANOTHER caſe mentioned by Dr. Chalmers of South-Carolina, of a negro man who was hung alive in gibbets, and in that ſituation deprived of any kind of drink, yet had regularly a diſcharge of nearly the ſame quantity of urine every morning. This, as he obſerves, undoubtedly took place, in con-

ſequence of the abſorption of the dews which fell during the night.

One more circumſtance in the caſe of this girl appears worthy of a particular remark, as it tends ſtrongly to evince the extraordinary power of the abſorbing veſſels of her mouth, œſophagus, and ſtomach; ſince it appears that ſhe was ſupported for ten weeks at a time in no other way than that of abſorption; as ſhe never kept any nouriſhment on her ſtomach for more than ten or fifteen minutes after eating, during the above-mentioned period, before a vomiting enſued and continued till her ſtomach was, to appearance, entirely evacuated.

From the effect of the ſudden ſhocks ſhe experienced by the fright from thunder, as well as the falling of the window, as mentioned in the hiſtory of her caſe, I ſhould have been induced to employ the power of electricity for her; but not being able to procure an apparatus of that kind, till towards the cloſe of her diſorder, it was unavoidably omitted.

By what ſecret inſtruments in her extraordinary ſyſtem the ſtone in the bladder was decompoſed, is no leſs ſurpriſing than many other appearances in her caſe. Though ſuch a ſtate of the fluids in the body may be as eaſily conceived of, as that which changes the hardeſt bones of adults into a ſubſtance as ſoft as mummy. This, though a rare occurrence, is nevertheleſs true.

X.

Two Caſes of the Retroverſio Uteri, *to which are added a few remarks and obſervations on that Diſeaſe, and the different ſpecies of* Procidentiæ Uteri. *By* Iſaac Senter, *M. D. Read February 2d,* 1790.

I WAS ſent for on the 8th of September, A. D. 1787, in the afternoon, to ſee Mrs. B——, turned of 37 years of age, ſuppoſed to be 13 weeks gone with her 15th child, including three immature births.

She was of a very lean, relaxed, and delicate conſtitution, ſallow complexion, irregu-

lar

lar in her menſes when ſhe was not with child, and, during her pregnancies, ſuffered ſo much from an acid ſtomach, coſtiveneſs, fever, *fluor albus*, *dyſpepſia*, &c. that ſhe was never able to nurſe any of her children after the two firſt.

She now complained of a difficult *micturition*, pain, and what is commonly called by the good-women, a *bearing-down*. Her pulſe was ſmall and very frequent; had a dry ſkin, furred tongue, with conſiderable thirſt, coſtiveneſs, &c. I directed a cool laxative diuretic draught, to be taken every two hours, and a clyſter in the evening.

Early on Sunday morning the 9th. I was called again to her, in great haſte, and was informed by the nurſe that ſhe had paſſed a very reſtleſs night, had voided neither *urine* nor *fæces*, though ſhe had made many attempts, and had been ſitting over the ſteams of a hot decoction of emollient herbs.

As the caſe now appeared to me of a more alarming nature, I made a more particular enquiry into the circumſtances attending it;

when the patient informed me, that about a week before my being called in, ſhe made a *mis-ſtep* in going down her chamber ſtairs, at which time ſhe felt ſuch an uncommon ſenſation as occaſioned a fit of fainting.

She ſoon recovered from that, but continued in much pain in her back, pelvis, &c. and perceived an unuſual difficulty in walking as well as in paſſing her urine; and that the *dyſuria*, coſtiveneſs, and pain had increaſed from the time of this accident to that of my viſiting her.

It now occurred to me that it was a *Retroverſio Uteri*—and when I had explained to her the nature of it, I ſuggeſted the neceſſity of a proper examination. The ſeverity of her pain induced a ready compliance—and, agreeably to my expectations, I found a tumour, tenſe and elaſtic, of the bigneſs of a child's head, within two inches of the external *labia pudendorum*, ſo firmly wedged in between the *ſymphyſis pubis* and *os coccygis* that it appeared immoveable, and preſſed ſo exceedingly hard againſt the lower part of the *rectum*, that nothing could paſs that tube without

out making uſe of more force than ſhe could conveniently bear.

I PASSED my fore finger up the *vagina*, under the *ſymphiſis pubis*, and with much difficulty diſcovered the *os tincæ*, preſſing upon the upper part of the *urethra* with a force I could not overcome. I now made ſundry attempts to raiſe the *tumour* and preſs it back into the abdomen, but they were ineffectual. I then examined the *hypogaſtric region*, which I found in a ſtate of tumefaction and tenderneſs. I ordered the nurſe to give a laxative clyſter while I went home for a catheter.

UPON my return I found that the ſeverity of her throes, had forced the injection from her immediately after its exhibition, and that it had only ſerved to increaſe her pain.

HER diſtreſs was now ſo extreme that ſhe could not anſwer to any queſtions I aſked her. I deſired her to take a poſition favourable for the introduction of the catheter: I attempted to paſs it with as much expedition as poſſible, and found no difficulty until the inſtrument

inſtrument had nearly reached the neck of the bladder, where the *vaginal tumour* preſſed ſo hard that I was obliged to give different directions to the point of the catheter before I could find admittance: I however effected it, and took from her about *ſix pints* of *urine*. This diminiſhed her pain ſo much that I was in hopes of ſucceeding in my next efforts. Theſe, however, proved ineffectual as before. I requeſted the favour of her to let me place her upon her *knees* and *elbows*, with her head and breaſt low on the pallet. I then gently introduced my right hand into the *vagina*, and encircled the tumour as much as poſſible with my fingers, with a view of applying the neceſſary force, with leſs injury to the uterus and its contents, as well as to diſcover more readily the particular parts that gave the greateſt reſiſtance.

NOTWITHSTANDING the bladder had been ſo completely emptied, and her poſition ſo favourable for the reduction, it required ſuch a force to overcome the reſiſtance of the parts, (for her ſtrainings were violent) as I ſhould not have dared to uſe, if the life of my patient had not appeared ſo imminently endangered

endangered by a failure in the attempt. After a few minutes ſteady preſſure, and gently diſengaging it from the upper part of the *ſymphyſis pubis*, &c. it began to give way, and I ſoon conducted it into the abdomen, above the brim of the *pelvis*, when ſhe cried out with raptures of joy, "*I am in a new world.*"

SHE was then turned upon her ſide, and the nurſe was ordered to adminiſter a clyſter; after the operation of which ſhe was conducted to bed, and her hips raiſed by pillows, where ſhe was ordered to remain, in a recumbent poſture, for ſeveral days.

BY the help of diet and cooling laxative medicines, ſuitable to her circumſtances, ſhe paſſed her urine and ſtools with eaſe and freedom, and, in the courſe of a week, ſhe was allowed to ſit up the greater part of the day in an eaſy chair.

SHE took a ſtrenthening electuary, with ſome of *elixir vitrioli* for ſeveral weeks, and obſerved more caution than uſual in her exerciſe, till the *uterine tumour* had become ſo large as to render a deſcenſion impoſſible.

DURING

DURING the remainder of her pregnancy she took as much exercise as usual, and was put to bed of a full grown healthy child.

IN her labour nothing extraordinary happened. Her pains were equal to the task; and the principal point I found necessary to attend to was keeping back the *os tincæ* from coming too low within the bones, after it was sufficiently dilated to let the head pass, and to assist the shoulders in the necessary half-turn, as well as to prevent them from following the head too suddenly.

SHE flooded after delivery more than was usual for her, (though she always suffered in that respect more than was common for other women) and the *uterus* contracted with more difficulty: Her recovery, however, was beyond her expectations.

FOUR months after this she again became pregnant, and between the third and fourth month I was called to her on account of a weight, pain, and pressure in her *pelvis*, *dysury*, difficulty of walking, &c. which had been gradually increasing for a fortnight.

SHE

SHE was now very much alarmed, apprehending the ſame difficulty as before, though ſhe was not ſenſible of experiencing any ſimilar accident.

BUT ſhe felt ſuch a preſſing down at the bottom of her belly as to give her great uneaſineſs, excluſive of the pain ariſing from her urinary obſtruction.

NOT doubting of the true nature of her complaints, I requeſted the nurſe to put her to bed, and told her I would call upon her again in a few minutes. I put a *catheter* in my pocket, and upon my return found her *uterus* in a ſtate of *retroverſion*, though in a leſs degree than before. I found the *os uteri* canted under the *ſymphyſis* of the *oſſa pubis*; and the *vaginal tumour* not ſo low in the pelvis as before. It was however ſo locked in between the ſurrounding bones, as by the touch, to give it the appearance of a pretty *firm*, *reſiſting*, *encyſted tumour*.

I EMPTIED the bladder by the *catheter* with very little difficulty, which contained

leſs

leſs urine than in the other caſe; and placing her upon her *knees* and *elbows*, as before, I effected the repoſition of the *uterus* without much reſiſtance.

A CLYSTER was now directed her, and the ſame poſition in the bed, precaution when up, medicine, diet, &c. as were ſucceſsful in the firſt caſe. She ſoon recovered ſo as to be able to move about her chamber with caution, went her full time out, and I again put her to bed of a full grown healthy child, without any occurrence worthy of notice during her travel, except a more ſevere flooding than ſhe had ever experienced, which commenced upon the delivery of the child. This appeared to be in conſequence of a *partial detachment* of the *placenta* during labour. This induced me to finiſh the delivery as ſoon as poſſible, without uſing more force than was proper. But the contractile power of the uterus not being ſufficient to ſtop the open veſſels, the *hæmorrhage* continued till ſhe was very much exhauſted; notwithſtanding the conſtant application of cold wet cloths to the *hypogaſtrium*, with cooling draughts, acidulated with the *vitriolic acid*, &c.

HER

HER recovery was, conſequently, tedious; though ſhe now enjoys a degree of health little different from what ſhe has done for many years.

IT was a current opinion among the ancient phyſicians, that the *uterus* was entirely ſupported in its proper place by the *broad and round ligaments;* and that it could not ſuffer a *deſcenſion* without the firſt of theſe being very much *relaxed*, or what they thought was much more common, *entirely broken.*

BUT a more accurate anatomical knowledge of the *uterus* and its appendages, with what has been collected from the inſpection of the bodies of thoſe who have died of a diſplacement of this organ, has demonſtrated to the moderns, that the *uterus* is held in its natural ſituation principally by *the fundus of the vagina* upon which it reſts; and that it is capable of ſuffering a complete *prolapſus*, whenever the upper part of the *vagina* becomes ſo relaxed as to admit the body of the *uterus* to paſs through it.

THIS error of the ancients is, however, much leſs ſurpriſing than that phyſicians of a much later date, and of no ſmall eſtimation in their profeſſion, ſhould have publicly doubted of the *reality* of either a *deſcenſion* or *retroverſion* of the *uterus*.

To determine, *à priori*, merely from the anatomical ſtructure of a part of the human body, what *can* or *cannot* happen to it by accident or other morbid cauſes, is a mode of reaſoning too fallacious to found any general doctrine upon in the healing art.

To illuſtrate the truth of this obſervation, we need only cite the concluſion of the great BOERHAAVE, upon the diſlocation of the head of the *os femoris*. From the very great ſtrength of the *ligaments*, and *depth* of the *ſocket* in that articulation, the learned *profeſſor* was of the opinion that the thigh bone was never diſlocated by external violence. The contrary of this, however, has been proved ſatisfactorily ſince his day, by ſeveral well authenticated caſes from practical ſurgeons and phyſicians of eminence.

To

To particulariſe the different ſpecies of the *procidentiæ uteri*, the various means by which the *uterus* may be diſplaced, and the remedies which have been, and are now in uſe for the cure, would exceed the limits which I have preſcribed to theſe remarks. They are treated of by ſeveral of the *ſyſtematic writers* in medicine; but I think, in general, in a looſe and unſatisfactory manner. Nor has the diſeaſe, in its different kinds and ſtages, till within a few years paſt, been handled ſcientifically by any one with whoſe works I am acquainted.

In the different ſpecies of the *procidentiæ uteri*, from a ſlight *deſcenſus* to a complete *inverſion*, the *fundus uteri* appears to me to deſcend generally in a pretty direct line with the *vagina*: while in that of a *retroverſion*, the *os tincæ* and *cervix uteri*, are generally raiſed higher in the *pelvis* than is natural: and in all the caſes I have obſerved, beſide thoſe related above, theſe parts were thrown under the *ſymphyſis pubis*, and preſſed, more or leſs, upon the upper part of the *urethra and bladder*.

As

As this retroverted ſtate of the *uterus* appears to me to be more peculiar to pregnancy, ſuch a poſition of that organ when diſplaced, is not to be wondered at, from its anterior connection with the bladder, by which it is carried up above the brim of the *pelvis*, in proportion as the *fundus* of the *urinary viſcus* is diſtended with water by a ſuppreſſion; while on its poſterior parts it is attached to the *inteſtinum rectum*, an accumulation of *fæces*, (to which pregnant women are ſo very prone) in that tube, ſerves to preſs this part of the *uterus* down into the hollow of the *ſacrum*. Add to this, the continual ſtraining occaſioned by the retention of *urine and fæces*, with the uneaſineſs, and in the worſt ſtages of the complaint, the excruciating pain from the *ſtrangulated uterus*, all naturally contribute to increaſe the malady. In this *hernial* ſtate of the *uterus*, ſome degree of inflammation ſoon takes place; and were it not that the *os tincæ* is generally preſſed ſo hard againſt the bones of the *pubis* and diſtended bladder, which prevents any dilatation of its orifice, nature would moſt probably very often relieve herſelf by an expulſion of the *fœtus*. And I have known more inſtances than one of abortions.

tions, which appeared to me to take place in conſequence of a *deſcent* of the *uterus*, but in ſuch a direct line, as to leave the *os tincæ* room to dilate whenever the contents of the *uterus* preſſed ſufficiently hard upon it.

In differently conſtructed *pelviſes*, as well as the different cauſes producing this diſeaſe, ſome conſiderable variation with reſpect to the direction of the *uterus*, may, and no doubt has, taken place in a *retroverted* ſtate. The *os tincæ* and *collum uteri* may be thrown into the hollow of the *coccyx* and the *fundus uteri* lodged upon the *pubis;* or it may deſcend in a direct line with the *axis* of the *uterus*. But I believe theſe poſitions very rarely happen, eſpecially where there is any conſiderable accumulation of *urine and fæces* accompanying the firſt ſtages of the diſeaſe.

I have know ſeveral inſtances of women in labour, at their full reckoning, when the *orificium uteri* was thrown high up into the hollow of the *ſacrum*, and remained ſo many hours, after the head of the child had preſſed the anterior part of the *collum uteri*, low down under the upper edge of the *ſymphyſis pubis*.

But

But they were in general, tedious travels, owing principally to the rigidity of the *os tincæ*, and the mal-direction of the *uterus*.

In whatever manner the *uterus* is diſplaced, the earlier it is attended to the more eaſily the difficulty is removed: and in the more early ſtages of it, by an advantageous poſture of the woman, joined to a freedom of the diſcharges of the bladder and *alvine tube*, it is not improbable that the *uterus* might, in ſome inſtances, reſtore itſelf to its natural ſituation.

But if once this diſeaſe gets ſo far advanced, as totally to obſtruct the exit of the *urine and fæces*, the hand of a dexterous *Accoucheur* appears to me indiſpenſibly neceſſary to effect the repoſition.

But previous to this, the *bladder* and the *rectum* ought, if poſſible, to be emptied by the gentleſt means that can effect it. And the patient in this, as in all other caſes of *ſtrangulated herniæ* ought to loſe blood immediately, unleſs contraindicated by a very relaxed and enfeebled conſtitution.

OTHER means have been directed, as well by ancient, as modern phyſicians, for reſtoring the uterus when diſplaced. However, in advanced ſtages of this malady, no time ſhould be loſt in employing any other remedy than the *manual operation.*

IF a repoſition cannot be effected by the hand, as has ſometimes been the caſe, the celebrated Dr. *William Hunter of London*, to whom the world is ſo much indebted for his judicious directions in this, as well as ſome other diſeaſes, adviſe to puncture the *uterus* with a *trochar*, in order to diſcharge the *liquor amnii*, and thereby facilitate the reduction of the *vaginal tumour.*

XI.

An account of a ſuppoſed caſe of Internal Dropſy of the Brain, ſucceſsfully treated by Mercury; by Benjamin Ruſh, M. D. *&c. Read May 4th*, 9790.

MISS S. F. aged 26, the daughter of a reputable citizen of Philadelphia, was ſeized about ſix months ago, in conſequence of having taken cold by wetting her feet, with a puking after taking aliment, and a pain in her head, both of which complaints were ſo ſlight as not to confine her, for five months, to the houſe. During this time ſhe was frequently troubled with a coldneſs in her hands, and pains in her neck, ſhoulders and limbs, which ſhe ſuppoſed to be of the rheumatic kind. Her eye-ſight was likewiſe impaired ſo that ſhe could not read by candle-light; but under all theſe circumſtances her appetite was better than uſual, her bowels were regular, and the catamenia diminiſhed only a little in quantity.

ABOUT

About eight weeks ago the pain in her head encreaſed, and was uſhered in every afternoon by a chilly fit. The puking became more conſtant—She ſeldom paſſed a night without being attacked by it about 12 o'clock. Much bile was diſcharged from her ſtomach. Her bowels became obſtinately bound, ſo as to be opened only by means of glyſters given every day.

In this ſituation, I was ſent for to viſit her, in conſultation with Dr. Say, who had adminiſtered to her all the uſual remedies for a weakneſs of the ſtomach. Her pulſe was ſlow, her ſkin dry, and her countenance indicated great languor and diſtreſs. Upon my firſt viſit I ſuſpected, with Dr. Say, the diſeaſe to be a high degree of Dyspepsy, and ſuggeſted the exhibition of milk by ſpoonfuls in the manner recommended by the late Dr. William Hunter. For a while her ſtomach retained this mild aliment, but two days afterwards, ſhe was ſeized with a return of her vomiting, accompanied by a violent convulſion, together with a perpetual winking, and a turning up of the whites of her eyes when ſhe

doſed. She complained now more than ever of a pain in the back part of her head, and was frequently delirious. Her coſtiveneſs continued, and ſhe paſſed more than four and twenty hours without diſcharging any urine. From this new complexion of her ſymptoms, we changed our opinion of the cauſe of her diſorder, and ſuſpected an effuſion of water in the brain. Under the impreſſion of this idea we directed a large quantity of mercurial ointment to be rubbed on her ſide. The next day ſhe had another fit, which was followed by an encreaſe of her delirium and a low weak pulſe. On the third day from the application of the ointment, the mercury affected her mouth. For ſeveral days ſhe diſcharged about a quart of ſaliva in the courſe of four and twenty hours. It was extremely agreeable to obſerve, in one week from the time the mercury began to act upon the glands of her throat, that the delirium left her—her ſtomach retained aliment—her pulſe became full, though ſomewhat quicker than natural,—and her ſleep, with the help of an anodyne, was eaſy and refreſhing. In two weeks from the application of the mercury ſhe walked about her

her room, and appeared to be perfectly recovered. Her complexion, ſtrength and chearfulneſs, a month afterwards, afforded marks of her reſtoration to perfect health.

A DILATATION of the pupil and ſtrabiſmus were abſent in this ſuppoſed caſe of internal dropſy of the brain. Diſeaſes with a train regular ſymptoms are to be found chiefly in books. The ſlowneſs of the pulſe in one, and its quickneſs in another ſtage—the vomiting mentioned by Dr. Huck in the caſe of Hargrave *, the pains in the limbs—the obſtinate pain in the head—the diminution of ſight—the ſlow diſcharges by urine and ſtools, and laſtly, the convulſions, all of which occurred in the above caſe, appear to be the moſt common and characteriſtic ſymptoms of an effuſion of water in the ventricles of the brain.

THERE was one more ſymptom, which I diſcovered after the recovery of our patient, which I have

* In the account of Hydrocephalus internus, publiſhed in Dr. Fothergill's works.

have I never known to be abſent from this diſorder, viz. *troubleſome and diſtreſſing dreams.* She informed me, that from the firſt attack of her diſeaſe, they had rendered her nights miſerable; and that ſhe had not known any relief from them, ſcarcely for a ſingle night, till after her recovery.

XII.

A ſhort Account of the Influenza which prevailed in America in the year 1789. *By* William Currie. *Read May* 4, 1790.

A DISEASE known in Europe by the name of the Influenza, by which is meant a contagious catarrh, made its appearance in North-America in 1789. Whether it originated in this country, or was imported, or which of the northern ſtates it firſt appeared in, I have not learned; but there is ſufficient proof that it appeared in New-York ſome time before it was obſerved in Philadelphia.

It appeared in the place laſt mentioned the latter end of September, during the annual meeting of the *Friends*, by ſome of whom, perhaps, it was brought from New-York.

From Philadelphia it ſpread to all the ſouthern ſtates in the courſe of a few weeks; but whether it proceeded to the Spaniſh ſettlements on the Miſſiſippi, or affected any of the Indian tribes, I have not been able to learn.

Its continuance in Philadelphia was about ſeven weeks, during which time the major part of the inhabitants were affected by it. The rapidity of its progreſs, and the univerſality of its ſway, gave riſe to an opinion with ſome that its cauſe was blended with, or ſuſpended in the air, and conveyed by the winds. But the known manner in which every other contagious diſeaſe is propagated renders this conjecture groundleſs.

The origin of this diſeaſe, as well as that of the ſmall-pox and meaſles, appears to be involved in impenetrable obſcurity.

THIS diſeaſe commenced with ſymptoms of laſſitude, debility, and chilline ſs, ſucceeded by feveriſh heat, oppreſſion about the præcordia, ſenſe of fulneſs and pain in the fore-part of the head and in the thorax, and alſo in the back, together with a teaſing cough, and a diſcharge of thin acrid fluid from the bronchiæ and noſtrils. Some were alſo troubled with ſneezing and ſore-eyes—and during the chill, ſeveral were affected with an inclination to puke, or with a diarrhœa.

I MET with a few who had the ſymptoms of pneumonia, but theſe caſes were not very common.

IN general, the pulſe was accelerated, and the ſkin conſiderably hotter than natural for the firſt two or three days, but the pulſe was ſeldom full or very hard—In many it was low, weak, and frequent—the appetite was always impaired. The feveriſh ſymptoms, pain and cough, generally increaſed for the firſt three or four days, but after that time gradually decreaſed, and for the moſt part ceaſed altogether by the eighth. When the ſymptoms began to abate, a diaphoreſis was generally

generally obſerved, as well as a freer expectoration.

This diſeaſe proved fatal to none, except a few very infirm or phthiſical patients, in Philadelphia—but in the ſouthern ſtates it was more mortal.

In the cure of this diſeaſe, in general, mild laxatives, joined with antimonials, and the antiphlogiſtic regimen, with bleeding, occaſionally, when the pulſe was full and hard, were all that I found neceſſary for the removal of the inflammatory ſymptoms: After which I found moderate doſes of opium the moſt certain remedy for the cough.

The caſes, however, in which I found bleeding of ſervice, were very few in compariſon of thoſe in which it was the reverſe.

Mild emetics had good effects after the inflammatory ſymptoms began to ſubſide; whether they would have been uſeful at an earlier period I do not know, as I did not make trial of them.

Those

THOSE who were left weak and languid had their ſtrength and health reſtored by taking a decoction of bark, with elixir of vitriol—or an infuſion of columbo root, and by the moderate uſe of claret, or other ſound wine, a nutritive diet of eaſy digeſtion, exerciſe, and ſuitable cloathing.

Ac-

XIII.

Account *of the* State *of the* Barometer.

M	B.	JANUARY, 1790.	W.
1	30.4	Fine pleaſant day	S. W.
2	30.4	Do. calm	
3	30.4	Do.	
4	30.4	Do.	
5	30.4	Cloudy overcaſt	N.
6	30.5	Clear, froſty day	N.
7	30.0	Cloudy, with ſhowers	S. W.
8	29.7	Overcaſt	S. W.
9	29.5	Clear day,	W.
10	30.0	Do. and windy	N. W.
11	30.0	Hazy, with ſnow	S. E.
12	30.0	Cloudy	S.
13	30.0	Do. and rain P. M.	S. E.
14	30.3	Foggy calm day	
15	30.3	Snow and rain P. M.	N. E.
16	30.0	Rainy day	S. W.
17	30.0	Fine clear day	W.
18	30.0	Hazy, foggy, calm day	
19	29.5	Thick, foggy and calm	
20	30.0	Fair windy day	N. W.
21	30.0	Clear cold wind	N. W.
22	30.0	Do. warmer	S. W.
23	30.0	Fine pleaſant day	S. W.
24	29.7	Rain and light ſnow	N. E.
25	30.0	Hazy overcaſt ſky	N.
26	30.0	Do. and rain at night	S.
27	29.7	Snowy day	W.
28	30.0	Foggy morning. P. M. clear	W.
29	30.0	Fine clear day	W.
30	30.0	Do.	
31	30.4	Do.	

M	B.	FEBRUARY, 1790.	W.
1	30.0	Rainy day	N. E.
2	30.0	Overcaſt	N.
3	30.0	Do.	N.
4	29.5	Heavy rain and ſleet	E.
5	30.0	Clear cold day, wind	N. W.
6	30.4	Do. very cold	N. W.
7	30.0	Overcaſt and wind at	S. W.
8	30.0	Fine clear day, high wind	N. W.
9	30.0	Snow A. M. wind	W.
10	30.3	Clear day and ſevere froſt	N. W.
11	30.3	Do.	W.
12	30.5	Do.	
13	30.5	Do. more moderate	
14	30.0	Rain and hail	S.
15	30.0	Fine pleaſant day	
16	30.0	Rainy, foggy day	S.
17	29.7	Do.	N. E.
18	29.7	Hazy foggy day	E.
19	29.5	Fine fair day	W.
20	29.5	Foggy, rainy day	S. E.
21	29.5	Hazy, foggy day	E.
22	29.5	Do.	
23	29.5	Do.	
24	29.3	Thick fog and rain. P. M. fair	S. W.
25	29.7	Clear day, high wind	N. W.
26	30.0	Fair pleaſant morning, calm	
27	30.0	Do. windy	N. W.
28	30.0	Do. high wind	S. W.

M	B.	MARCH, 1790.	W.
1	29.5	Fair morning. P. M. ſnow and rain	N. E.
2	29.5	Overcaſt calm morning	
3	29.5	Clear day, high wind	W.
4	30.0	Do. very cold	N W.
5	30.0	Fair pleaſant day	S.
6	29.5	Flying clouds and ſhowers	S.
7	29 5	High wind and cold	N. W.
8	30.0	Do.	W.
9	30.5	Do. and extreme cold	N. W.
10	30.0	Overcaſt. P. M. ſnow	W.
11	30.0	Deep ſnow	W.
12	30.0	Fair day	W
13	30.0	Overcaſt, rainy	S. W.
14	30.0	Do. A. M. P. M. clear	S. W.
15	30.3	Fair pleaſant day	N. W
16	30.3	Overcaſt rainy day	S. E.
17	29.5	Do.	S. E.
18	30.0	Clear day	N. W.
19	30.3	Do. very pleaſant	N. W.
20	30.3	Do. but colder	S. E.
21	30.0	Fine pleaſant day	S.
22	30.0	Overcaſt with ſhowers P. M.	E.
23	30.0	Do. A. M. P. M. clear	N. E.
24	29.7	Rainy day	N. E.
25	29.7	Fair and calm	
26	30.0	Rainy day	E.
27	29.5	Showers and ſunſhine	S.
28	29.5	Overcaſt	N. E.
29	30.0	Do.	N. E.
30	30.0	Clear day	N. W.
31	30.3	Do.	W.

M	B.	APRIL, 1790.	W.
1	30.0	Fair	S. E.
2	29.3	Hard rain	S. W.
3	30.0	Fair pleaſant day	W.
4	30.0	Do.	S.
5	30.0	Do.	S. E.
6	30.0	Heavy rain all day	N. E.
7	30.0	Clear pleaſant day	W.
8	30.0	Do.	S. W.
9	29.5	Do.	
10	29.5	Do. with thunder guſt	S.
11	29.3	Clouds, ſhowers and ſunſhine	W.
12	29.7	Fair day	W.
13	29.7	Do.	W.
14	29.7	Rainy day	E.
15	29.7	Do.	N. E.
16	30.0	Cold clear day	E.
17	30.0	Cloudy and cold	N. E.
18	29.5	Storm of rain and wind	N. E.
19	29.5	Clear day	N. W.
20	29.5	Cloudy and ſhowers	N. E.
21	29.5	Fine clear day	W.
22	29.5	Showers and ſunſhine	W.
23	29.5	Do.	S. W.
24	29.5	Do.	E.
25	29.5	Do.	
26	30.0	Do.	
27	30.0	Cloudy and cold	N. W.
28	30.0	Snow ſtorm	N. W.
29	30.0	Cloudy	W.
30	30.0	Fair day	W.

M	B.	MAY, 1790.	W.
1	30.0	Fine pleasant day - -	S.
2	30.0	Do. - - -	
3	30.0	Warm hazy day - -	S.
4	30.0	Cloudy - - -	E.
5	30.0	Do. - - -	N.
6	30.0	Do. - - -	W.
7	30.3	Clear day and cool - -	N. E.
8	30.3	Do. - - -	E.
9	30.0	Do. - -	E.
10	30.0	Do. warmer - -	S.
11	30.0	Very warm and clear - -	
12	30.0	Do. - -	

M.	B.	JUNE, 1790.	W.
1	30.0	Fair day	S.
2	30.0	Do.	S. W.
3	30.0	Guſt, P. M.	W.
4	30 0	Overcaſt and very cool	N. W.
5	30.0	Do.	
6	30.0	Fair warm day	S.
7	29.5	Rainy morning. P. M. clear	W.
8	30.0	Fair fine day	W.
9	30.0	Do.	
10	29.5	Heavy rain	E.
11	30.0	Clear day	S. W.
12	29.5	Heavy rain	S. W.
13	30.0	Clear day	W.
14	30.0	Do.	
15	30.0	Do.	N. E.
16	30.0	Do.	S. W.
17	30.0	Do. very hot	W.
18	30.0	Overcaſt	E.
19	30.0	Do.	W.
20	30.0	Fair pleaſant day	N. W.
21	30.0	Do.	
22	30.0	Do.	W.
23	30.0	Overcaſt	W.
24	30.0	Do.	S. E.
25	29.7	Heavy rain all day	S. E.
26	29.7	Frequent ſhowers	S. E.
27	29.7	Cloudy overcaſt	N. E.
28	29.7	Clear day	W.
29	29.7	Sultry, with ſhowers	S. W.
30	29.7	Pleaſant day	S. W.

M	B.	JULY, 1790.	W.
1	30.0	Cloudy cool day	S. W.
2	30.0	Clear and pleaſant	S. W.
3	30.0	Do.	W.
4	30.0	Do.	S. W.
5	30.0	Do.	W.
6	30.0	Do.	W.
7	29.7	Do.	
8	30.0	Do. cool clear day	W.
9	30.0	Do.	N. W.
10	30.0	Do. warmer	S.
11	30.0	Overcaſt and light ſhowers	W.
12	30.0	Do.	S. W.
13	30.0	Overcaſt morning	S. E.
14	30.0	Fair warm day	S.
15	30.0	Do.	S.
16	30.0	Overcaſt, ſultry	S.
17	30.0	Fair pleaſant day	S.
18	29.7	Overcaſt. Heavy ſhowers, A. M.	E.
19	29.7	Do.	N. W.
20	29.7	Do.	
21	30.0	Fine clear day, very warm	W.
22	30.0	Do.	W.
23	30.0	Do.	S. W.
24	30.0	Do.	S. W.
25	29.5	Clear and cool wind	N. W.
26	30.0	Do.	N. W.
27	30.0	Overcaſt and warm	S. W.
28	30.0	Fine clear day	W.
29	30.0	Do.	
30	30.0	Do.	W.
31	30.0	Do.	

M	B.	AUGUST, 1790.	W.
1	30.0	Fair warm day	S. W.
2	30.0	Do. ſlight ſhowers, P. M.	S.
3	30.0	Cool day	N. E.
4	30.0	Do.	E.
5	30.0	Very warm	S. W.
6	30.0	Do.	S.
7	30.0	Overcaſt and light ſhowers	S.
8	30.0	Do.	
9	29.7	Heavy rain	S.
10	29.7	Overcaſt and cloudy	S.
11	30.0	Do. with ſhowers	N. E.
12	30.0	Do.	S.
13	30.0	Clear warm day	S. W.
14	30.0	Do.	
15	30.0	Do.	S. W.
16	30.0	Cloudy, with ſhowers	W.
17	30.0	Clear warm day	W.
18	30.0	Do.	
19	30.0	Do. very cool	N. W.
20	30.0	Do.	
21	30.0	Do.	N. E.
22	30.0	Do.	N. E.
23	30.0	Do.	N. E.
24	30.0	Do. warmer	S.
25	29.7	Do. with ſhowers	S. W.
26	29.7	Clear pleaſant day	S. W.
27	29.7	Do. with ſhowers	E.
28	30.0	Fair warm day	N. W.
29	30.0	Do.	S. W.
30	30.0	Do.	
31	30.0	Overcaſt	E.

M	B.	SEPTEMBER, 1790.	W.
1	30.0	Hazy	S. E.
2	29.7	Do.	S.
3	30.0	Fine ſerene day	N. W.
4	30.0	Do.	S. W.
5	30.0	Do.	W.
6	30.0	Variable weather	W.
7	30.2	Fine ſerene day	W.
8	30.0	Overcaſt	S. W.
9	30.3	Do.	S. W.
10	30.0	Clear warm day	S.
11	30.0	Do. very warm	S. E.
12	30.0	Overcaſt	E.
13	30.0	Do.	E.
14	30.0	Do. rain at evening	S. E.
15	30.0	Cool day and cloudy	N.
16	30.0	Do.	N. W.
17	30.0	Fine clear day	W.
18	30.0	Do.	S. E.
19	30.0	Overcaſt	E.
20	30.0	Do.	N. E.
21	30.0	Do.	E.
22	30.0	Do. P. M. fair	E.
23	30.0	Do. rain at night	
24	30.0	Fair ſerene day	N. W.
25	30.0	Do.	W.
26	30.0	Do.	S.
27	30.0	Rainy day	S.
28	30.0	Overcaſt	E.
29	30.0	Do. and rain all night	E.
30	30.0	Clear fine day	W.

M	B.	OCTOBER, 1790.	W.
1	30.3	Fair ſerene day	W.
2	30.3	Do.	W.
3	29.7	Do.	W.
4	29.7	Very warm and ſhowery P. M.	S. W.
5	29.5	Do. no rain	S.
6	29.5	Do. rain at night	S.
7	30.0	Clear cool day	N. W.
8	30.0	Overcaſt, and rain at night	S.
9	29.7	Do. and rain	N. E.
10	29.7	Do.	N. E.
11	30.2	Fine clear day	N. W.
12	30.6	Do.	N. W.
13	29.5	Heavy rain all day	N. E.
14	29.5	Fair morning. P. M. cloudy	W.
15	29.7	Clear day	N. W.
16	29.7	Do.	W.
17	30.0	Do.	W.
18	30.0	Do.	S. W.
19	30.0	Do.	E.
20	30.0	Cloudy	N. E.
21	30.0	Clear	W.
22	30.0	Do.	W.
23	30.0	Do.	W.
24	30.0	Do.	S.
25	30.0	Do.	S.
26	30.0	Cloudy, cold and windy	W.
27	30.0	Clear day	W.
28	30 0	Do.	S. W.
29	30.0	Do.	
30	30.0	Rainy day	S. W.
31	30.0	Fine clear warm day	W.

M	B.	NOVEMBER, 1790.	W.
1	30.0	Cloudy	S. W.
2	30.0	Fair	W.
3	29.7	Rainy day	E.
4	29.5	Cloudy	W.
5	30.0	Do. and cold	W.
6	30.0	Do. and windy	
7	30.0	Clear do.	N. W.
8	30.0	Do.	
9	30.0	Do.	
10	30.0	Overcaſt	N. W.
11	30.0	Clear day	N. W.
12	30.0	Do.	N.
13	30.0	Do.	W.
14	29.7	Rainy day	E.
15	30.0	Fine warm calm day	
16	29.7	Rain all day	N. E.
17	29.7	Do.	N. E.
18	29.7	Cloudy overcaſt	N.
19	30.0	Fine clear day	N. W.
20	30.0	Do.	
21	30.0	Do.	
22	30.0	Do.	
23	29.6	Overcaſt morning. P M. clear	W.
24	29.7	Do. all day	W.
25	30.0	Fine clear day	N. W
26	30.3	Snow ſtorm from	N. E.
27	30.0	Do. continued	
28	30.0	Clear, cold	N. W
29	30.0	Do.	N. W
30	30.5	Do.	W.

M	B.	DECEMBER, 1790.	W
1	30.5	Fine clear day	N. W
2	30.0	Heavy rain	N. E.
3	29.5	Cloudy morn. P. M. fair	W.
4	29.5	Clear day	N. W.
5	29.5	Do. high wind	N. W.
6	30.0	Clear day	N. W.
7	30.0	Cloudy	N. W.
8	30.5	Clear, hard froſt	N. W.
9	30.6	Do. river cloſed	N
10	30.0	Hazy, more moderate	E.
11	30.0	Foggy calm day	E.
12	29.7	Do. A. M P. M. clear	W.
13	29.7	Overcaſt, cloudy	S. W.
14	30.0	Clear day	N. W.
15	30.4	Do.	W.
16	29.5	Fall of ſnow	E.
17	30.0	Clear cold	N. W.
18	30.4	Severe cold. River cloſe	N. W.
19	30.4	Do.	S. W.
20	30.9	Hazy moderate day	S. W.
21	29.7	Snow from	N. E.
22	30.4	Clear cold	N. W.
23	30.4	Do.	S. W.
24	30.0	Do.	S. W.
25	30.0	Snow	N. E.
26	30.0	Fine clear day	W.
27	30.0	Do.	W.
28	30.0	Do.	W.
29	29.7	Overcaſt hazy	S.
30	30.3	Clear cold	N.
31	30.0	Overcaſt	N. W.

XIV.

Case of Inverted Uterus; by Benjamin Duffield, M. D. *Fellow of the College. Read Feb. 1st*, 1791.

Decem. 1790, ON the fifth day of this month, about half after two o'clock in the afternoon, I was desired to visit the wife of ——— ———, in the district of Southwark. The husband, who called me, informed me that his wife had just been delivered of a fine child; but that the midwife wished immediate assistance, as some uncommon accident had happened, which had much alarmed her. I immediately accompanied him—and found the patient lying on the foot of the bed, upon her side, in a cold and clammy sweat—her eyes glassy—no pulse perceptible at the wrist, and all appearances seeming to indicate immediate dissolution. Urged by the clamours which surrounded me, and which the fears and terror of the midwife excited in the friends attending her, I

was

was hurried to an inſtant examination without enquiring accurately, or indeed at all, what was the matter.

As I attempted to paſs my hand between the thighs, in order to touch, I immediately found the uterus inverted in a very great degree. It appeared, as nearly as I could eſtimate, by incloſing it in my hands, to be protruded about ſeven inches in its ſhorteſt, and nine inches in its longeſt diameter. The room being dark, I thought proper to take the advantage of the confuſion uſual on ſuch occaſions, to requeſt a candle. It was brought, and I was ſuffered to have a ſlight view of the parts. The appearance of the uterus exhibited that of a parenchyma, ſtriated with veſſels of different kinds and colours, as they were full or emptied; and I imagined, that I could accurately define the ſpot to which the placenta had been affixed. This I was led to believe, from what I may not improperly term the parenchymatous ſubſtance of that part, being rugous—bloody, and its ſurface being covered with membraneus and gelatineus ſubſtances.

As I choſe not to expoſe the deranged part to the action of the air any longer, I immediately

ately called for a ſoft greaſed cloth, and prepared to attempt the reduction. My reaſon for uſing the cloth greaſed was this—I conceived that if applied dry, its adheſion to the irritable ſurface of the uterus would be intimate, and its ſeparation from it in conſequence be very painful. I then placed one hand on each ſide of the uterus, and by gradual compreſſion, aſſiſted with a gentle motion upwards, aſſimilated as nearly to the axis of the pubis as poſſible, after ſome minutes perſeverance, I completed the reduction. It is to be obſerved, that previous to the attempt, I had, as well as my frightened aſſiſtants could afford me their aid, placed her on her back, with her buttocks elevated by pillows, and her knees ſeparated by perſons on each ſide.

I NOW began to examine the ſituation of my patient, with reſpect to hæmorrhage previous to my arrival. By the appearances of the floor and the bed, I perceived that a conſiderable quantity of blood had been loſt: and indeed from the ſtate in which I found her, I could not have ſuſpected otherwiſe. During the time of reduction the hæmorrhage

was

was not profuſe, and when that was effected, it was conſiderably diminiſhed.

It may now be proper to obſerve, that ſhe was a woman of thirty years and ſix months old, rather above the middle ſize, well made, of a chearful diſpoſition, and accuſtomed to an actively induſtrious life. She had already been delivered of ſeven living children. Some months previous to the preſent labour, ſhe had been afflicted with pains in her back of a tranſient duration. The child of which ſhe had been juſt delivered was large and well formed in every reſpect.

I then endeavoured to collect the hiſtory of the caſe from the midwife. She informed me, that the preſentation was natural; the labour gradual and ſhort. That as ſoon as the child was born, ſhe tied the cord, and proceeded to the extraction of the placenta; in which ſhe obſtinately inſiſted, ſhe had uſed no uncommon force; but from my knowledge of her, I was much inclined to diſbelieve her aſſertion. To uſe her own language, ſhe had made a little effort to pull it away, when out all came together.

gether. That ſhe found a great round body coming behind the cake which was faſt to it, juſt like two muffins or rolls baked together: and that ſhe put her fingers between the cake and that body and tore away the ſkins which faſtened them—then the cake came away, and the reſt inſtantly fell down farther.

From this account, from the appearance of the woman, from the recollection of ſimilar caſes, of which the event is almoſt conſtantly recorded as fatal, I had but ſlender hopes of rendering further ſervice to my patient. I, however, turned her a little on one ſide, and as the hæmorrhage now appeared to increaſe, I ordered cloths dipped in vinegar with a ſmall proportion of brandy, to be applied to the os externum, and to the whole abdomen with a greater proportion of the ardent ſpirit. Cold wine was preſcribed to be given in the doſe of a tea-ſpoonful or two every fifteen minutes, and that ſhe ſhould not be ſtirred from her poſture until I again viſited her. This was about five o'clock in the evening—when I found they had put her to bed in the uſual manner. She ſpoke low, and faintly—no pulſe was to be felt at the wriſt—

the

the forehead and extremities, covered with cold clammy ſweats, and the countenance by no means favourable. I ſtaid a conſiderable time with her; deſired the continuance of the applications and the wine alone, or diluted, as ſhe choſe it, at very ſhort intervals. The midwife was ordered in caſe of pain and reſtleſſneſs, to give thirty five drops of laudanum, and if thoſe were not ſufficient, to add fifteen every hour till it took effect. I inſiſted particularly on abſolute ſilence, and as much ſolitude as poſſible.

Dec. 6. I was called this morning at ſeven, and informed ſhe had been ſo delirious about eleven o'clock the night before as to require being held. That ſhe had complained of ſhiverings and ſickneſs at ſtomach. But that after the opium ſhe had reſted near two hours. Large glyſters of oil, rendered miſcible with water by means of vegetable mucilage, were directed every hour.

1. P. M. No evacuation by ſtool or urine. Pulſe not yet perceivable. Sweat clammy, yet

yet not cold. Eyes and countenance rather more natural.

6. P. M. A ſmall creeping pulſe to be perceived——countenance and ſpirits better. Hands cold, but the arms warmer; her feet dry, and more agreeable to the feel. She diſcovers ſome inclination to urine, for which, as well as obvious reaſons, I omit the uſe of the catheter. Repeat the draught, and continue the regimen.

Dec. 7. 8. A. M. Find her pulſe rather quick and active, tho' ſmall. The natural heat in ſome degree returned. She has twice made water with great eaſe.

As her milk fever ſeems to approach, and pulſe is active, a julep of ſpiritus nitri dulcis ordered to be taken every two hours. She complains of ſickneſs at ſtomach and a little pain in the abdomen; which has not yet diſcovered any tenſion, or much pain on preſſuae. Let the wine be diſcontinued for toaſt and water.

5. P. M.

5. P. M. She has diſcharged three pints and one half of urine at twice. Pulſe fuller and more active. Thirſt increaſing—no ſtool—ordered ſome caſtor oil to be added to the uſual glyſter. I muſt here obſerve, that as ſhe had no ſtools in time of labour, I was leſs anxious to procure one for reaſons evident to every practitioner. Continue her diluent drinks, and repeat the draught as uſual.

Dec. 6. 10. A. M. Found her almoſt eaſy and free from pain, except the ſeat of the lower dorſal and firſt of the lumbar vertebræ now and then being attacked with ſtinging ſenſations. Her belly not more painful to the touch, and has no great increaſe of action in her pulſe. She has paſſed urine freely, and has had one very large evacuation by ſtool—Continues her diluents—The child has ſucked eagerly, and the night paſſed comfortably without the laudanum.

7. P. M. Not ſo well—fever and thirſt increaſed, and a light tenſion of the abdomen perceivable. Another ſtool and diſcharge of urine—feels an appetite for the firſt time—ordered

ordered ſago, and a ſtrict obſervance of her horizontal poſture. Repeat the draught.

9. During the 8th and this day better; and has had comfortable ſleep. Voice and countenance better; takes nouriſhment freely, and is almoſt free of fever—abdomen nearly natural with reſpect to the touch, and its evacuations—Draught diſcontinued.

10. In the ſame ſituation as yeſterday, except a kind of tediouſneſs in making water.

11. Better.

12, 13, 14. As on the 11th.

16 to 21. Has not yet ſat up, but in very impatient, and recruits ſtrength.

22. Sat up an hour.

25. Find her convaleſcent.

1791, Jan. 3d. Free from every complaint and conſiders herſelf as perfectly well.

XV.

An Extraordinary Case of a rupture of the ligament of the Os Humeri, with the cure thereof. By Dr. Benjamin Say, *Treasurer of the College. Read February* 1, 1791.

ON the eighth day of May 1789, I was sent for to visit James Bartram, senior; a gentleman near sixty years of age, in Kingsessing, four miles from town, who, the messenger informed me, had a fall from his horse, and dislocated his right shoulder. I rode out with all convenient speed. Upon examining the shoulder, I found a prominence of that part of the clavicle next the humerus, and as I thought of the acromion scapulæ, together with an apparent cavity, the common criterion by which luxation is generally known, and found the head of the humerus as low as the axilla; from this view of the parts, I did not hesitate to pronounce that there was a complete dislocation of the limb, in consequence of which

the neceſſary bandages were prepared, together with proper aſſiſtants to reinſtate the joint, when we made a conſiderable extenſion upon it; but what was my ſurpriſe, when, in this intended reduction, the ſeparation of the bones from each other was evidently increaſed, and the ſcapula appeared to be, (as it really was) attached to the head of the humerus, thoſe two bones retaining invariably their contiguity with each other. Finding myſelf now in a perplexed ſituation, I requeſted the gentlemen to relax the parts by declining the extenſion; I then claſped the ſhoulder with both my hands, and with conſiderable eaſe to myſelf, and not much pain to my patient, brought all the parts into their proper places; but upon removing my hands, the humerus and ſcapula together immediately fell down again to that part from which I had juſt before brought them. I was now convinced that there was ſomething very extraordinary in this caſe, and that the ligament uniting the clavicle with the acromion ſcapulæ was completely ſeparated; for, upon minute and cloſe inſpection, there was neither fracture nor luxation to be found. As it was at a diſtance from the city I could not immediately conſult any of my brethren

upon this new and important caſe, and therefore concluded, for the preſent, to attempt the retention of the bones by the common luxation bandage, ſupporting the arm with the handkerchief ſling. He complained of much pain in his right ſide, which part, upon examination, did not exhibit the leaſt degree of external injury, yet from the acuteneſs of the pain, I feared that inflammation might take place from internal contuſion; to prevent which, I bled him plentifully, and gave him ſmall doſes of the ſal glauberi to be repeated *pro re nata*, with diluent drinks.

I LEFT him after the firſt viſit with very little ſatisfaction to myſelf, being fearful that the dreſſings, which I had now applied to the diſordered part, would be attended with no great advantage, and upon viſiting him the next day, the 9th, found my apprehenſions verified, for the bones were not retained in their natural ſituation as I in ſome meaſure had left them; the bandage was now tightened, but with little hopes of being more fortunate. I communicated the caſe to two or three of the faculty, members of the College, who declared the caſe to be new, and conſequently,

quently, from previous experience, nothing could be gained in what way this rare accident might beſt be treated. He ſtill complained of the pain in his ſide, and alſo in the ſhoulder, attended with ſome fever, but the latter ſoon gave way to the antiphlogiſtic treatment—I continued to viſit him occaſionally till the 14th, and was mortified to find, that the bones could not be kept together by this mode, the bandage having been tightened ſo as to give him extreme pain; I was, however, greatly relieved from much anxiety of mind, upon applying the leathern ſling communicated by Mr Parke of Liverpool to Dr Monroe, a drawing and deſcription whereof appear in the 6th volume of Bell's Surgery, which ſling I had made for the purpoſe, and applied it on the 16th of May, juſt eight days after the accident, the bones being ſtill eaſily brought into contiguity with each other. I was much pleaſed upon viſiting him on the 18th, the ſecond day after this new mode of treatment, to find that the head of the humerus was ſtill as I had left it on the 16th, nearly in its natural poſition, and confidently congratulated my patient with a ſucceſsful cure. I continued my attention to him, tightening the ſtrap which

extended to the collar, as occaſion required, till the 11th day of June, being near four weeks from the time the ſling was applied, when I ventured with care to remove it. Upon examining the joint, I was pleaſed to find the bones in proximity, with even a ſmall degree of motion in them; I concluded, however, that it would be proper to reapply the ſling, the parts being yet in a ſtate of debility; he experiences now but little pain, excepting at night after having lain a few hours in bed; but to remedy this, I deſired him to looſen the ſtrap when he went to bed, but to be careful to tighten it upon riſing, which he continued in the practice of for ſome time, and found an advantage in it. June 22d. This day I removed the ſling for about half an hour, moved the limb in different directions, the bones being nearly in their natural ſituation. He now ſleeps better, is clear of fever, bowels regular, with a good appetite. I recommended to him to leave off the ſling every night from this time, but be careful to re-apply it every morning upon riſing.—I continued my viſits occaſionally till the 10th of July, on which day I found him buſily employed

employed ſhocking grain after the reapers in his harveſt field, with his left hand, ſtill continuing to wear his ſling, which he ſaid he could not leave off without pain; I recommended that he ſhould wear it one month longer, which he complied with; and I can now with great ſatisfaction mention, that the cure is compleated, that he has the perfect uſe of his arm, and is in a good ſtate of health.

XVI.

An account of an Head-ach, cured by the Diſcharge of a Worm from the Noſe. By Thomas H. Stockett.—*Practitioner of phyſic at South River, Maryland. Read April 5th*, 1791.

AN old lady in Lower Malbro', had for ſix or eight months paſt, an excruciating head-ach; about three weeks ago, there commenced a diſcharge of bloody matter from one noſtril, the pain by degrees falling

to

to the corner of the eye on the ſide from which the diſcharge proceeded. Within a few days, ſhe cloſed the noſtril not affected and blew hard, when out flew a *worm*, about two inches long, apparently with a head at each end, which was white, and the body brown. Its action was like what is called an inch *worm*, and on its back ſcales were perceptible.

THIS old lady ſays, that one day laſt ſummer, ſhe was walking in her garden, pulled a roſe and ſmelled it, and immediately a painful ſenſation took place in her head, juſt above the noſtril that has been affected; and ſhe remembers to have obſerved ſome ſmall white worms on the roſe, which are common to that flower, from which moment ſhe has not been without pain until ſhe diſcharged it.

XVII.

An Account of a new Bitter prepared from the bark of the root of the Liriodendron Tulipifera. *By* Benjamin Rush, *M. D. &c.* *Read May* 3, 1791.

HAVING frequently heard from different country people that the bark of the Liriodendron Tulipifera of Linnæus, commonly called by them the red poplar tree, afforded a strong bitter, I employed a man in the month of February last to procure about thirty pounds of it for me. It had a strong bitter, accompanied with a slight aromatic taste, in its fresh state. To ascertain its sensible qualities and virtues more accurately, I subjected it to the following pharmaceutical experiments, the result of which I beg leave to communicate to the College.

1st. I BOILED about two pounds of the fresh root in half a gallon of water, from which I obtained a strong bitter extract, equal, in my opinion, to the extract of gentian.

2d.

2d. I infuſed four ounces of the freſh bark, cut into ſmall pieces, in a quart of proof ſpirit, from which I obtained a tincture which poſſeſſed a taſte *ſimply* bitter, and of a peculiarly mild nature.

3d. I boiled an ounce of the dried bark in a quart of water, to a pint—the liquor was bitter, but leſs ſo than the tincture made with ſpirit.

4th. I infuſed an ounce of the dried bark in a pint of water for twenty-four hours. The infuſion was bitter.

5th. In attempting to reduce the dried bark to powder, I found it broke in ſmall fibres, ſo that little powder was obtained from it. Upon toaſting it a little over a ſlow fire, it was pulveriſed without difficulty. The powder was ſtrongly impregnated with a bitter taſte.

I HAVE preſcribed this new bitter ſeveral times, and have found it equal to moſt of the *common* bitters of our ſhops,

I HAVE no doubt of its efficacy in all thoſe diſeaſes in which mild bitters are uſed. Conſidering how great a proportion that claſs of medicines compoſes of the quantity and expence of all our preſcriptions, eſpecially in chronic diſeaſes, I flatter myſelf that the introduction of a new article belonging to that claſs, and which may be procured in great quantities in every part of our country, at a trifling expence, will be an acceptable addition to the intereſts of medicine in the United States.

I HAVE accompanied this communication with ſpecimens of each of the preparations of the root, which I ſubmit to the examination of the College.

May 2d, 1791.

P. S. SINCE the above communication, I have preſcribed a large quantity of the root of this bitter in powder; and, I am happy in being able to add, with as much ſatisfaction as any of the common bitters of our ſhops.

May 30, 1793.

XVIII.

An Account of a ſingular Caſe of the Small-Pox, ſucceſsfully treated by the plentiful uſe of Bark, fermented liquors, and animal food. *By* Benjamin Ruſh, *M. D. &c. Read July* 5, 1791.

SAMUEL EWING, aged twenty-five, a citizen of the State of Kentucke, was ſeized, ſoon after his arrival in our city from a ſea voyage, with a fever, which, from the circumſtances and ſymptoms attending it, I judged to be the eruptive fever of the ſmall-pox.

I WAS called to him on the 24th of May, when his pulſe was active, but not ſo tenſe or full as to require bleeding. I ordered him a doſe of tartar emetic and calomel, which operated plentifully both upwards and downwards, and gave him conſiderable relief.

Two days afterwards an eruption appeared on his ſkin, attended with delirium. His

pock

pocks were diſtinct, but very ſmall, and ſo numerous, that every part of his body was covered with them, except a ſmall ſpace on his neck and breaſt. His appearance gave me but a ſlender hope of his recovery; but I was reſolved to attempt it—For this purpoſe I began by applying a bliſter to the neck, which removed his delirium in four and twenty hours; and by giving him calomel in ſmall doſes, with a view of ſupporting and attenuating the diſcharge from the ſalivary glands, during the ſecondary fever, a mode of treating that ſymptom which I had purſued with ſucceſs in many caſes, before the practice of inoculating became general in our city, and which I learned from my firſt Preceptor in Medicine the worthy Preſident of our College. I gave him, at the ſame time, the bark, increaſing it gradually from two drachms to two ounces a day.

On the 5th day after his eruption, all the pocks below his knees were of a purple colour, and a large mortification was diſcovered on both his buttocks. Not the leaſt ſwelling appeared in his face, or matter in his pock; nor was there any tendency to a defluxion

on

on the glands of his throat. The danger of theſe ſymptoms was much increaſed by the heat of the weather, for the mercury during their worſt ſtage ſtood at 90° in Fahrenheit's thermometer. Such was the ſmell which came from his body, at this time, that it was perceived in every room of the houſe in which he lodged.

In this ſituation of my patient I ordered him to drink wine, porter and cyder in large quantities, and recommended his eating plentifully of animal food.

Soon after the uſe of theſe cordial remedies, the pocks aſſumed a better appearance, and a vigour was given to his pulſe which encouraged me to entertain ſtronger hopes of his recovery. I ordered his nurſe to cut off the heads of the pocks with a pair of ſciſſars, and to wipe the matter from them with a ſoft piece of cloth, and afterwards to bathe them with equal parts of rum and vinegar—alſo with oil of turpentine and ſweet oil. His room was fumigated with vinegar, and with burnt gun-powder and tobacco, every day—

and

and his feet and legs bathed twice a-day in warm water.

THE greateſt attention was paid to frequent changes of his linen. Opium was given, occaſionally, both day and night. Its doſe was regulated by the ſtate of his bowels, and by the preſence or abſence of ſleep. On the 8th of June the ſcabs began to fall off, and on the 12th of the ſame month I conſidered him as out of danger. A ſlight cough continued for a few days after, which yielded to a diet of muſh and milk.*

THE following circumſtances in the above caſe appear to merit attention.

1ſt. There was no ſwelling in the face or ſalivation in any ſtage of the diſorder. Dr. Sydenham ſays he never ſaw but one caſe of a recovery from a malignant or dangerous ſmall-pox, without a ſalivation. I never ſaw one before, and never an inſtance of ſuch a number

* This cough was ſo much increaſed after every doſe of bark he took, in the beginning of his convaleſcence, that I was obliged to leave off giving it to him ſooner than I intended.

number of pocks, accompanied with ſo little ſwelling, which did not terminate in death.

2d. The quantities of fermented liquors which were taken by this patient. Theſe liquors were gradually increaſed and gradually diminiſhed as his diſeaſe advanced and declined. He drank *five* bottles of porter on the 7th day of June, *three* bottles on the 8th, and *two* and an *half* of cyder; *three* bottles of porter on the 9th, two on the 10th, and *one* a-day for three days afterwards. Theſe liquors have an immenſe advantage over ardent ſpirits, in conveying nouriſhment into the body, and thereby extending a more durable ſtimulus to every part of the ſyſtem.

3d. A third circumſtance attending this caſe was, his plentiful uſe of animal food, conſiſting chiefly of ſalted ham and tongue, and of beef-ſteaks.

This was likewiſe increaſed and diminiſhed with the increaſe and decline of his diſorder. He took about eight ounces of this ſolid and ſtimulating diet on the 7th of June; ſix on the 8th, and five on the 9th—with each

each of theſe meals he ate a large quantity of bread and green peas. He drank likewiſe occaſionally of ſtrong coffee, with which he eat plentifully of bread and butter.

4. Beſides theſe unuſual quantities of cordial drinks and diet, he took, in the courſe of his illneſs, *a pound and an half* of the powder of bark.

I SHOULD be ungrateful in cloſing this account of Mr Ewing's caſe, without acknowledging my obligations to the nurſe who attended him. All my directions were executed by her with a degree of fidelity, judgment, and humanity which contributed greatly to his recovery. I hope our College will permit me to mention her name in this commemoration—It is MARY WATERS. Whole pages of hiſtory have often been filled with the exploits of perſons leſs worthy of being known to the public.

June 16, 1791.

P. S. I HAVE had an opportunity laſt month of ſeeing the good effects of cordial and ſtimulating aliment in a caſe of typhus

ſmall pox in a black woman, an hired ſervant of Peter Miller's of this city. The pocks were very numerous—and for a while flat and watery. There was ſcarcely any ſwelling in her face. She ate every day two or three boiled eggs, likewiſe freſh and ſalted meat, and drank plentifully of fermented liquors. She is now in good health.

June 4th, 1793.

XIX.

An Account of the Effects of ELECTRICITY, *in the removal of an Obſtruction in the biliary duct, in a letter from Dr.* Jacob Hall, *Principal of Cokeſbury College in Maryland, to* Benjamin Ruſh, M. D. *&c. Read Auguſt 2*, 1791.

"AMONGST the many well-atteſted inſtances of the good effects of Electricity in the cure of diſeaſes, I beg leave with gratitude to mention, for the benefit of others, a recent cure effected in myſelf; by the removal of an obſtruction in the biliary duct—

a caſe which I do not remember to have ſeen upon record—About the latter end of February laſt, while engaged in the duties of my ſtation, I was ſuddenly ſeized with a ſharp, pungent pain of the ſtomach, accompanied with an unuſual diſtenſion, and fixed pain in the region of the liver——I repaired home as ſpeedily as poſſible, through a heavy rain, where as ſoon as I arrived, a ſpontaneous vomiting came on, which continued till evening, when, by the power of an anodyne, the vomiting ceaſed, and I enjoyed a tolerable night. In the morning, attempting to riſe, I was arreſted by a ſhort ſyncope or fainting fit—after which the vomiting returned, together with the pain in the right hypocondrium as before. As ſoon as the vomiting (but not the pain) had yielded to medicine, I began to examine into the cauſe of my complaint, which, from the icteric ſymptoms, I knew to be the jaundice, and the proximate cauſe, an obſtruction in the biliary duct—I had recourſe to the medicines commonly preſcribed in this diſeaſe, without being able to remove the pain—which continued for ſeveral days, with various degrees of intenſity and remiſſion, while I enjoyed eaſy nights from the palliative power

of opium. Tired, at length, of this amuſing medicine, I thought of taking reſt without it—the conſequence was a painful, reſtleſs night; but during my reflections on the remedies recommended by medical writers for expelling *Gall-ſtones*, it was ſuggeſted to me, that *Electric fire* would effect the cure. Accordingly, in the morning, with pain and difficulty, I came to the college, and the machine being put in order, I received *three ſtrong ſhocks*, which paſſed through my left arm and breaſt, and out of my right ſide, through the part affected; after which, the pain *ſuddenly* and *entirely* ceaſed! and, in the evening, a diarrhœa came on, which, by its appearance, demonſtrated that the obſtruction was removed.

XX.

Medical Facts and Observations, extracted from a letter from Moſes Bartram, M. D. *of St. Paul's Pariſh, South Carolina, to* Benjamin Ruſh, M. D. *&c. Read September 6th,* 1791.

THE hiſtories of diſeaſes and daily experience confirm the great variety of types diſeaſes aſſume from the operation of climate, the arts and refinements of a poliſhed life, peculiar ſituation and intercourſe of men, and the various modes of treatment; but notwithſtanding the dark veil thoſe combined cauſes throw over the genuine face of nature, a prominent feature will always protrude here and there, to lead to a diſcovery of the truth—Natura ſemper eundem habet modum et ſimpliciter. A long continued ſeries of particular motions or actions, gene-

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rates a peculiar and more or leſs durable diſpoſition of parts, effluvia, or humors, which, agreeably to the well known axiom of like cauſes producing like effects, will propagate and reproduce ſimilar ones. The former being entailed on the poſterity, produce hereditary diſeaſes; and the others, by coming in contact with bodies prediſpoſed to morbid changes. Many diſeaſes, originally or naturally quite void of infection or contagion, may become ſo from a particular concurrence of circumſtances, and may loſe that quality entirely, or in part, from other cauſes. Thus dyſentery, ſcurvy, conſumption, influenza, and ſome of the impetigines, have been alternately aſſerted and denied to be infectious or contagious.

I HAVE been led to adopt the above notions from obſervation of ſeveral caſes of Lepra in this country, and of a moſt terrible univerſal eruption of the pſora genus, infeſting the inhabitants on the Eaſt coaſt of Africa; of which I ſaw and attentively examined ſeveral caſes in ſome ſhipwrecked Frenchmen, whom we took aboard from the Iſland Johanna in my voyage to the Indies. The latter, though in a reſidence of ſeveral months on the iſland, and

and a ſtay of near two aboard our ſhip, did not communicate the leaſt of the infection to any body in the freeſt intercourſe and familiarity with the moſt of the company. I have ſeen ſeveral caſes of Lepra here, which Dr. Cullen and moſt writers declare to be infectious; but the patients, from the united teſtimony of many people lived in families in the moſt unreſtrained ſociability for years without the leaſt bad conſequence to any body. I have known ſeveral people thus affected, who ſolemnly declared, that their complaints aroſe from ſudden expoſure to cold, when exceſſively heated; and from the exactneſs with which they traced them, it was indiſputably the truth.

A lady informed me lately that, ſome years ago, ſhe laboured under a moſt ſevere tympanitis inteſtinalis above a year, which was miſtaken ſome months for pregnancy, and at length reduced her ſo low, that her life was deſpaired of, and her phyſicians, men of great eminence, gave her over. One day ſhe conceived a ſtrong fancy for tobacco, which ſhe indulged

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ed herſelf in, ſmoking moſt liberally; and in a very ſhort time, was both ſurprized and delighted with a ſudden relief from her extreme miſery, by the total ſubſiding of her tumid abdomen, and a copious expulſion of the flatus. She ſpeedily recovered her health, but for ſome time was liable to a return of her complaint, which baffled all the tonics and ſtimulants that could be deviſed, and readily yielded to tobacco ſmoked.

THE hint I have often heard you give of the probability of a ſpecific action of certain ſubſtances, as of ſome being confined to the nerves, and others to the vaſcular ſyſtem, ſeemed to receive ſupport from a very intereſting caſe I ſome time ſince had under my care. A child three years old, was ſeized with inſanity or rather idiotiſm, ſuddenly, without the ſmalleſt degree of fever, or any other complaint to account for ſo ſtrange an affection.—The parents were greatly alarmed and ſent for me;—I arrived when the child had been a few hours in this condition, examined it very cloſely, found its pulſe moderate and natural, no preternatural heat or fluſhing, no thirſt,

thirſt, tongue clean, no internal function whatever diſturbed, but thoſe of the brain; the child was to all appearance happy, talking all the incoherent nonſenſe that can be imagined, laughing, and in conſtant motion; but laboured under ſo great a debility, that it could not ſtand or walk without tottering; and ſeveral times in attempting it fell down; it was a perfect delirium mite. I had fortunately ſeen ſeveral ſuch caſes from eating the ſeeds of the datura ſtramonium, or thorn apple, in Philadelphia, which made a conſiderable impreſſion upon me. Perſuaded that the caſe before me was another of the ſame kind, I queſtioned the patients ſtrictly, if the child had not been eating ſomething improper; they anſwered confidently in the negative; I ſtill expreſſed my doubts, and at laſt told them poſitively it had been taking ſome of the above apple; they were ſurpriſed at my obſtinacy, and declared none grew near the houſe.—I immediately gave it a large doſe of tartar emetic, recollecting that, in the former caſes, there had been a great inſenſibility of the ſtomach; this not proving ſufficient, and the child taking the medicine with reluctance,

luctance, I introduced a funnel into the mouth, and forced down a great quantity of warm water, which had the desired effect. The matter was now determined; I was highly gratified and the bystanders all astonished at the sight of a table spoonful of the seeds and the thorny covering. The child after this improved rapidly, and in a few days was perfectly recovered.

I LATELY attended a case of pleurisy in a violent degree in a negro man, middle aged, whom I bled on the third day of the disease, being the first visit, and notwithstanding this, blistering and all the usual remedies, it went on raging with a burning fever, till the 9th day, with a constant sweat all the time, when his spirits and strength were excessively reduced, and his pulse intermitted and fluttered in a remarkable degree, from three to nine or ten pulsations, strong and rapid, followed by an intermission equal to the time of five or six. This remarkable irregularity continued between two and three days. This, with other symptoms equally threatening, made me almost despair; but I did not relinquish him, as I make it a point never to give up a patient. What was to be done? There was no apparent difficulty

ficulty of expectoration,—cough mild and moderate. I had tried every thing that could be thought of, without effect—a briſk vomit preſented itſelf to my mind as as the laſt reſource; I gave it; was amazed at the ſucceſs, and ſaved my patient. He diſcharged a great quantity of viſcid olive-coloured phlegm, and felt immediate relief. I mean to repeat this experiment, and hope to find it of great conſequence. It is a general remark here that one bleeding in the pleuriſy is ſufficient; and a certain eminent phyſician, ſome time deceaſed, famed for his ſucceſs in this diſeaſe, uſed to truſt entirely to one bleeding as early as poſſible, and profuſe ſweating. I have obſerved in ſeveral ſucceſsful caſes, a very great diaphoreſis kept up with great eaſe, five or ſix days, with a rapid tolerably ſtrong pulſe the whole time. Does not this invalidate Dr. Cullen's doctrine of fever?

A STRONG deſire to have my doubts removed upon a matter of ſome conſequence, induces me to treſpaſs a little farther upon your patience. I lately had a moſt obſtinate caſe of colic, moſt probably from cold, though it differed conſiderably from all the ſpecies deſcribed

ſcribed in noſologies and commonly met with. It is an eſtabliſhed opinion among the Blacks, and indeed many Whites, that the negroes are very apt to poiſon one another, and that the effects produced are exactly, *ad punctum*, like the caſe to which I allude. It was a moſt obſtinate conſtipation, with tumefaction, tenſion, and pain of the abdomen, frequent, almoſt conſtant vomiting, and quick full pulſe for ſeven or eight days. At the end of this time, the pulſe ſunk amazingly, and for three days before the happy relief from the remedy to be preſently mentioned, it was like a mere thread with the pulſation too quick to be numbered, extremities cold and debility extreme. Having tried lenient and ſtrong purges, various enemata, opium, heat, in a dry and humid form, ſtimulant fomentations, and a bliſter to the abdomen, without the leaſt advantage, and placing no dependance on argentum vivum, from the ill ſucceſs of it in a variety of caſes mentioned both by Dr. Stevenſon and others, I was dtermined to have recourſe to the celebrated remdy of the former, mentioned in the Edinburgh Medical eſſays, viz. cold water daſhed upon the extremities. I ordered the coldeſt water to be procured, and threw it myſelf upon

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on the legs, thighs, and pubes. He felt eaſy directly, but had no diſcharge. I then ſwathed the belly in a cloth, dripping wet with cold water, and ſome time after repeated it to the lower extremities.—In half an hour after this, he had a fine diſcharge, which was followed by half a dozen others very copious. From this time he mended very rapidly. My doubts are with reſpect to the rationale of the application. Here was a directly debilitating power uſed in a great degree of aſthenia with advantage. This too militates againſt two remedies univerſally admitted in the above complaint, viz. Laudanum, and warm bath. Does it operate by reducing the excitement, already far below the healthy ſtandard, and increaſing the excitability, thus taken in a general ſenſe, whereby the action of the bowels is effected by the natural ſtimulus of fæces? Or does it act as an aſthenic power on the ſurface, and thus leave a relatively greater ſtimulus upon the inteſtines? This is quite oppoſite to one of Dr. Brown's fundamental principles, that the excitement is indiviſible, univerſal, and of only one kind.

I HAVE collected a few more medical facts, which I will take great pleaſure in detailing from time to time, if you ſhould, dear ſir, wade through this with any ſort of reliſh. If you will pleaſe to gratify me with an anſwer, and in it point out the exceptionable parts of this epiſtle with their amendments, one eſſential purpoſe I had in writing will be fully anſwered.

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XXI.

An Account of the ſudden effects of the affuſion of cold water upon the body, in a caſe of Tetanus, by Dr. Benjamin H. Tallman, *of Haddonfield, New-Jerſey. Read October 4th,* 1791.

I WAS called July the 11th, 1791, to a young woman about twenty years of age, of a plethoric habit of body, who was affected with a Tetanic complaint, accompanied with Hyſteria. The ſymptoms were a rigidity of the muſcles of the neck, a pain at the lower end of the ſternum, a ſlight ſtiffneſs of the muſcles of the lower jaw, a little difficulty of deglutition, and an hard full pulſe. ——On enquiry, I found that ſhe had complained of a pain in the ſcrobiculus cordis, three days previouſly to my being called. The only probable cauſe of her complaints was a ſmall excoriation of one toe, from wearing a tight leather ſhoe, which happened a week before the firſt appearance of the diſorder. Her pulſe being full, I took twelve ounces

ounces of blood from her, and then gave her muſk, camphor, and one grain of opium every hour, till the ſpaſms ſhould abate. The opium was continued till twenty grains were taken, which produced a ſmall remiſſion of the ſymptoms for three hours only. I viſited her the 12th, and found every ſymptom much increaſed with the loſs of her eye-ſight, hearing and ſpeech. She was coſtive; an enema was exhibited. The medicines were continued with the addition of Pilulæ Fœtidæ and Unguentum Cœruleum. On the 13th, I found her no better. I viſited her on the 14th, and found her diſorder much increaſed; her deglutition was obſtructed, ſo that not the leaſt medicine or aliment could be taken. I requeſted that a phyſician ſhould be called from Philadelphia. Doctor Ruſh was ſent for, who recommended an affuſion of COLD WATER over her whole body. Her pulſe was now full and ſoft:—A large bucket of water from the river was thrown over her, which produced inſtantly a ſyncope that laſted upwards of half an hour. When ſhe recovered from this ſtate ſhe ſpoke, and in half an hour more ſhe was able to ſwallow. Immediately after the ſyncope went off, her ca-

temenia

temenia returned, a few days before their regular time of approaching. On the 15th, I gave her a few drops of aether and the oil of amber, and on the 16th, she took bark and wine in liberal quantities; from the use of all which remedies, she was, in a few days, restored to perfect health.

XXII.

Case of Anthrax, by John Jones, *M. D. late Vice-President of the College. Read December* 6, 1791.

AS the following case may throw some light upon the treatment of a disease, violent and painful in its nature and frequently dangerous in its consequences, the College may not think it undeserving a place in their collection.

IN the month of January, 1789, I was desired to visit a lady approaching her 60th year, but of a good constitution, active and

healthy: ſhe was then confined to her bed, but as the ſymptoms, which previouſly attended her, appear very characteriſtic of the diſeaſe, I ſhall relate them in her own words as communicated to me in a letter. "Early in the month of January, I found myſelf extremely indiſpoſed, attended with an unuſual depreſſion of ſpirits, and a want of appetite, which I could by no means account for—I felt a feveriſh heat and conſtant thirſt—had frequent chills, and ſoon perceived a diſagreeable ſenſation upon the back of my neck, which I compared to the crawling of caterpillars, and very often it appeared to me as my handkerchief was riſing from my neck. A few days after this ſenſation began, a ſmall pimple made its appearance juſt below the neck bone, attended with excruciating pain—my ſleep was diſturbed by frightful dreams. One night particularly, I fancied I was thrown upon a grate of red hot coals, and that my neck burſt into burning flakes—I awaked in the utmoſt terror, and related this dream to the family—I complained more and more of the inflammation which gave me ſtill greater torture, and had then aſſumed the appearance of a ſmall angry blind bile—the night before

my chamber, which was near a fortnight from my firſt indiſpoſition, as I went up ſtairs I felt a ſhock through my whole frame, as ſudden and general as a ſevere ſhock of electricity—A poultice of bread and milk was then applied, and continued for three or four days till you was called in——At this period, when I firſt ſaw her, the inflammation had extended itſelf from the firſt vertebra of the neck to the inferior ſpines of the ſcapula, and from ſhoulder to ſhoulder—the tumour was extremely hard, of a deep red colour in the circumference, but approaching to livid in the central part with very little elevation of the ſkin—her pulſe was quick but not full—her thirſt great, with a conſtant ſenſation of heat, like burning coals upon the part affected, which was now evidently tending to a mortification.—Under theſe circumſtances, the principal curative indications appeared to be a proper ſupport of the patient's ſtrength—a regulation of the natural ſecretions and excretions, and at the ſame time as much alleviation of the extreme burning pain as could be prudently procured by anodynes. With theſe views, a poultice of the farina lini was applied over

the inflamed parts, and renewed every ſix or eight hours—a diet, conſiſting of gruel, panada, and wine whey, was ordered in ſuch quantities as her ſtomach would bear—the body was kept gently open by emollient glyſters—ſhe took a tea-ſpoonful of bark in powder every four or five hours, and, at night, ſuch a quantity of laudanum, as ſerved to compoſe her for a few hours. Under this management ſhe continued till the 19th day from the firſt application of the poultice, when the whole extent of the inflammation appeared of a deep black, and completely mortified. Preſſure with the fingers upon the mortified parts, though very hard and tenſe, evidently indicated, from a craſhing undulating noiſe and feel, the exiſtence of ſome fluid beneath, and induced me to make a longitudinal inciſion through the true ſkin the whole length of the tumour, by which means a large quantity of tolerably well digeſted matter was not only diſcharged from the cavity, but large portions of it poured from the cells of the true ſkin become perfectly ſpongy and enlarged to the thickneſs of an inch and a half—This operation gave not the leaſt pain; but, on making

ing another croſs inciſion, ſeemed to afford a ſenſible relief, by taking off a moſt uneaſy ſtricture which ſhe had before complained of — The wound was dreſſed with ſoft lint, covered with ſimple cerate, and a thick compreſs, dipped in brandy, laid over the whole. As the diſcharge was very great and offenſive, it was dreſſed twice a-day, and the compreſs frequently moiſtened with brandy. The uſe of the bark was continued, her diet rendered more cordial by a liberal uſe of wine, and different portions of the mortified membrana adipoſa daily removed, till a complete ſeparation between the ſound and mortified parts took place ; but as this ſeparation, which was the work of nature, left the edges of the ſore with large flabby irregular lips, under which the matter lodged, and prevented a re-union, I was under the diſagreeable neceſſity of removing them from the whole circumference of the ſore. This was a very painful operation, but it was abſolutely neceſſary, and ſhe bore it with great fortitude. From this period, the cure went on very happily, though ſlowly, and in the beginning of June, the

ſore was compleatly healed, leaving a cicatrix, of a radiated form, eight inches long and five broad. Her health has been ſince very good, and ſhe finds no other inconvenience, than a degree of tightneſs and reſtraint in the motions of her arms about the ſhoulders.

XXIII.

THERMOMETER.

JANUARY, 1791.

	at 8 A. M.		at 2 P. M.	
1		15		21
2		9		30
3		14		34
4		32		40
5		35		40
6		36		45
7		40		48
8		35		32
9		27		27
10		34		39
11		27		28
12		22		32
13		31		49
14		36		49
15		38		41
16		37		44
17		32		38
18		31		36
19		23		25
20		26		34
21		32		46
22		29		22
23		17		32
24		23		34
25		37		48
26		38		50
27		33		44
28		29		31
29		19		33
30		34		40
31		20		28

FEBRUARY, 1791.

1	at 8. A. M.	20	at 2 P. M.	26
2		30		32
3		29		32
4		32		39
5		34		35
6		35		44
7		39		50
8		49		60
9		25		25
10		24		32
11		23		36
12		30		41
13		30		39
14		35		54
15		23		35
16		39		36
17		6		14
18		14		30
19		27		32
20		27		32
21		20		25
22		15		39
23		28		42
24		25		33
25		28		37
26		40		41
27		31		54
28		56		52

MARCH, 1791.

1	at 8. A. M.	28	at 2. P. M.	33
2		28		42
3		38		52
4		36		49
5		34		48
6		42		56
7		52		62
8		36		45
9		31		45
10		48		60
11		46		44
12		43		49
13		45		44
14		37		48
15		47		52
16		44		57
17		45		77
18		42		79
19		47		38
20		33		38
21		36		51
22		44		50
23		39		52
24		48		64
25		54		62
26		43		58
27		40		52
28		37		45
29		43		54
30		45		55
31		40		60

APRIL, 1791.

1	at 8. A. M	45	at 2. P. M.	62
2		43		61
3		32		60
4		37		52
5		40		55
6		35		54
7		38		56
8		40		50
9		38		56
10		43		57
11		45		68
12		50		76
13		60		75
14		42		54
15		50		60
16		50		60
17		50		66
18		56		70
19		49		65
20		47		66
21		47		67
22		57		69
23		60		73
24		52		65
25		54		80
26		55		70
27		45		65
28		53		62
29		54		71
30		55		68

MAY, 1791.

1	at 8. A. M.	55	at 2. P. M.	79
2		52		71
3		54		66
4		55		70
5		59		68
6		50		60
7		47		60
8		50		66
9		55		71
10		49		77
11		61		84
12		65		82
13		65		81
14		50		61
15		66		71
16		57		73
17		58		75
18		60		77
19		60		76
20		60		71
21		55		70
22		60		74
23		55		81
24		62		82
25		70		78
26		65		82
27		69		84
28		70		87
29		70		89
30		71		91

JUNE, 1791.

1	at 8. A. M	65	at 2. P. M.	79
2		66		80
3		71		80
4		66		75
5		62		80
6		66		78
7		63		76
8		64		87
9		74		92
10		75		80
11		65		85
12		69		86
13		70		91
14		75		93
15		68		84
16		60		85
17		72		92
18		74		85
19		75		88
20		57		74
21		58		74
22		60		80
23		70		88
24		76		89
25		76		89
26		74		92
27		70		80
28		62		84
29		62		81
30		65		85

JULY, 1791.

1	at 8. A. M.	65	at 2. P. M.	69
2		57		75
3		62		77
4		61		76
5		60		77
6		62		86
7		70		88
8		72		92
9		72		91
10		73		95
11		71		94
12		73		86
13		72		87
14		75		95
15		73		94
16		75		89
17		68		92
18		63		76
19		62		80
20		63		81
21		71		83
22		76		91
23		72		86
24		73		90
25		68		84
26		64		88
27		65		87
28		65		90
29		68		89
30		72		83
31		74		85

AUGUST, 1791.

1	at 8. A. M.	70	at 2. A. M.	91
2		63		82
3		63		86
4		66		84
5		65		87
6		67		85
7		71		88
8		70		87
9		72		88
10		75		88
11		74		82
12		71		83
13		67		81
14		68		87
15		63		81
16		70		89
17		67		86
18		69		84
19		64		71
20		62		74
21		63		77
22		61		77
23		66		86
24		67		88
25		71		89
26		73		93
27		68		92
28		71		91
29		86		95
30		70		93
31		67		86

SEPTEMBER, 1791.

1	at 8. A. M.	69	at 2. P. M.	81
2		62		79
3		61		61
4		60		68
5		62		71
6		62		74
7		65		78
8		64		81
9		65		79
10		66		76
11		71		73
12		64		71
13		59		85
14		63		69
15		57		58
16		52		66
17		50		70
18		60		75
19		59		77
20		65		82
21		60		74
22		57		75
23		71		82
24		70		82
25		65		72
26		58		60
27		62		74
28		55		69
29		51		69
30		60		81

OCTOBER, 1791.

1	at 8. A. M.	61	at 2. P. M.	82
2		70		82
3		61		64
4		40		58
5		53		64
6		42		66
7		41		70
8		48		69
9		45		67
10		40		49
11		40		65
12		47		67
13		36		52
14		33		63
15		51		75
16		44		50
17		39		54
18		32		36
19		36		50
20		37		40
21		36		56
22		30		43
23		30		50
24		33		54
25		40		49
26		42		50
27		35		52
28		39		55
29		41		60
30		44		67
31		57		68

NOVEMBER, 1791.

1	at 8. A. M.	44	at 2. P. M.	55
2		32		53
3		40		32
4		27		32
5		29		52
6		37		55
7		33		61
8		34		62
9		40		50
10		46		57
11		37		50
12		30		49
13		36		52
14		50		67
15		51		54
16		49		54
17		30		44
18		28		40
19		32		49
20		28		41
21		37		59
22		42		50
23		31		55
24		40		60
25		45		49
26		30		37
27		29		50
28		30		49
29				
30		30		52

DECEMBER, 1791.

1	at 8. A. M.	49	at 2. P. M.	63
2		43		40
3		27		37
4		26		38
5		30		34
6		31		32
7		21		25
8		19		28
9		22		32
10		25		39
11		28		43
12		35		35
13		29		33
14		28		34
15		27		38
16		28		47
17		34		47
18		37		42
19		40		40
20		27		31
21		23		
22		27		27
23		31		32
24		20		28
25		23		39
26		28		48
27		30		46
28		33		50
29		33		41
30		26		41
31		36		48

XXIV.

Case of Dysenteria Chronica cured by Allum, *by* Dr. Michael Leib. *Read March* 6, 1792.

A. B. aged thirty-two years, was admitted as a patient of the Dispensary on the sixth of October, 1789. About eight months previous to his admission he was attacked with Dysentery. At his admission his dejections were frequent and bloody, the tormina and tenesmus considerable, with little or no pyrexia—he was much emaciated, and rendered unable to work—Cathartic, stimulant, and astringent medicines were exhibited for a long time, but without effect—His body at length exhibited a cachectic appearance, his legs became œdematous, and general anasarca seemed to be forming. Finding the inefficacy of emetics, cathartics, opium, the bark, cinnamon, port wine, &c. on the sixth of May, 1791, I exhibited the following mixture.

℞. Aluminis ʒj.
Tinct. thebaic. ʒiij.
—— Cort. Peruv.
Infus. Amar. āā ℥iv. m. cap. coch. mag. un. quater in die.

Opiate pills were conſtantly given at night. He felt ſome relief from the mixture, and had it repeated on the fifteenth, in the following manner.

℞. Aluminis ʒifs.
Tinct. Opii ʒiij.
—— Cort. Peruv. ℥vj. m. cap. ut antea.

This mixture made an evident impreſſion on his diſeaſe. On the 22d he had it repeated in the following proportion.

℞. Aluminis ʒij.
Tinct. Opii ʒiij.
Infus. Amar.
Tinct. C. P. āā ℥iv. m. cap. ut antea.

His health now became much improved, his countenance was animated, and the œdema ſubſided.

On the 31ſt. the laſt preſcribed mixture was repeated, and compleated his cure.

Lest

LEST it might be ſuppoſed that the cure was owing to the other medicines which were exhibited with the alum, it may be proper to remark, that they were adminiſtered for a long time without the alum, and without effect.

XXV.

An Account of one of the Cauſes of the Triſmus Naſcentium. By the late Moſes Bartram, *M. D. of South-Carolina, extracted from a Letter to* Benjamin Ruſh, *M. D. &c.—Read May* 1, 1792.

NOT a little chagrined ſince entering into practice in this country at the uniform fatality of the Triſmus Naſcentium, ſo prevalent among the infant negroes, to which I have often been a painful witneſs, I have applied myſelf to diſcover its cauſes, not only for my own ſatisfaction, but to endeavour, if poſſible, to cut off one of the many avenues to death.

IF future experience and obſervations ſhould prove my opinion of one of its cauſes to be

well founded, I ſhall enjoy the conſolation of having elucidated an obſcure ſubject—for I can truly aver, that I have never ſeen or heard a ſingle hint reſpecting the cauſe of which I am about to attempt the explanation.

The miſmanagement of the navel very ſoon after birth, peculiar to the negroes, is the ſource of this direful malady. After making the ligature, and cutting the umbilical chord, they very often neglect to ſwathe or bandage the abdomen, whence the dropping of the piece is retarded, the umbilicus is diſtended and puffed out even with the natural moderate efforts, but much more when violent ſtruggles are excited in crying, and colic, occaſioned ſometimes by the mother's milk, rendered pernicious by unavoidable errors in diet, their hard fate often compelling them to food of a deſtructive quality. When it drops there is commonly left a bad ulceration both from the cauſe juſt mentioned, and the friction of looſe coarſe cloths. The violent irritation from this ſore, even with lenient, emollient dreſſings, in ſuch delicate ſyſtems, ſeems competent to produce the diſeaſe; but how much more ſo, when, inſtead of endeavouring

ing to abate it by ſuch means, they augment the evil by the worſt of dreſſings, viz. burnt rag or burnt lint. This they invariably uſe. It not only ſuddenly conſtricts the ulceration, but at the ſame time violently irritates—the gradual depletion of the veſſels is checked, they become diſtended, and inflammation is the conſequence. When it is healed, this proceſs is ſo rapid in the integuments, that the parts beneath, from a want of ſufficicient digeſtion, do not accommodate themſelves, but ſuffer violent ſtretching in every effort of the abdominal muſcles, which, from a neglect of the neceſſary precaution of tight bandaging, eaſily yield to any increaſed action of the inteſtines preſſing againſt the umbilicus: Hence the very frequent tumefied navels, ſo many partial *herniæ umbilicales* among negroes.

This reaſoning will be rendered more probable by a ſhort ſketch of the hiſtory of the diſeaſe. For the moſt part it makes its attack with the dropping of the cord. It never occurs before the ligature falls, though it ſometimes, but very rarely, does ſeveral days, nay

a week after it is entirely healed, to appearance. However this will not in the leaſt invalidate our poſition or ſurpriſe us, when it is compared with ſeveral inſtances upon record of tetanus in adults taking place long after the wound is perfectly cicatriſed. In this caſe the diſeaſe can always be traced to the healing of the cord, though at firſt the ſymptoms were obſcure, the child only ſhewing a reſtleſſneſs until the evil is manifeſted in ſpaſms. It moſtly comes on about the ninth day after the birth, and then ſeldom laſts above three days. But when it comes on two or three weeks after birth, it is much ſlower in its progreſs to death, which is the infallible termination of it after the jaw-fall is confirmed. All the caſes I have ſeen, or heard of from others, after diligent enquiry, are melancholy proofs of this truth, notwithſtanding the aſſiduous exhibitions of unguentum mercuriale, opium, warm bath, purgatives, enemata, cataplaſms to the navel, and univerſal friction with oil. Though this ſpecies of triſmus is aſſuredly fatal after it is fixed, a reform in the treatment of the navel, both before and after the decay of the rem-

nant

nant of the cord, holds out a certain and eaſy preventative.

WHAT gave birth to the foregoing theory was a caſe to which I was called ſome time ago, but an hour or two before the patient's death. The child was three weeks old. It being only the ſecond caſe I had ſeen, having had no information concerning this diſeaſe, I did not attend to the navel, or ſuſpect any complaint there, till the attendants mentioned it, and deſired me to examine it. I found it much ſwelled, inflamed, and ulcerated, with burnt rag covering it, which immediately ſtruck me as the ſole cauſe of all the miſchief. The firſt ſymptoms of the diſeaſe, though obſcure, came on a few hours after the ſtring dropped, which happened eleven or twelve days before, when the inflammation and ulceration began, and continued increaſing till death. The convulſive twitches in the back were in the beginning trifling, and repeated after very long intervals. They gradually became more frequent and violent—the muſcles of the jaws rigid and contracted, but deglutition very little, if at all, impeded. At length the ſpaſmodic rigidity became general from head to foot, not

a ſingle muſcle of voluntary motion but the eye-lids relaxed, with frequent paroxyſms in which it lay quite inſenſible, with the reſpiration ſuppreſſed almoſt to ſtrangulation, hands clinched, and feet contracted. Very ſcanty diſcharge of fæces in hard, roundiſh ſcybala, like rabbits'. This was the condition in which I found it, and in which it died.

XXVI.

Practical Obſervations on Phthiſis pulmonalis; Extracted from a letter from Iſaac Senter, *M. D. to Dr.* William Currie. *Read Auguſt* 7, 1792.

WITH reſpect to the kaumis, which you hint as being ſerviceable in conſumption, I can ſay nothing practically. I have ſeen mention made of it in the tranſactions you ſpeak of; but notwithſtanding this, and every other aid that the very imperfect art of medicine can deviſe, I have long ſince deſpaired of ever curing the phthiſis pulmonalis

lis in certain conſtitutions, and in certain ſtages of the complaint. Many chronic diſeaſes, may, probably, owe their cauſes to debility ; ſtill there are many more that fall under that deſcription, which I am by no means ſatisfied with as the origin of the complaint.

A FAULTY organization appears to me to induce a very conſiderable proportion of the diſeaſes both of body and mind. There are many perſons afflicted with chronic diſeaſes, which terminate fatally, who, till within a ſhort time of their death, diſcover no conſiderable atony or debility in the digeſtive or chyliferous organs, and many of thoſe who do diſcover ſuch complaints, bear the tonic or corroborating plan of medicine, but very imperfectly and perhaps not all. In the cure of the complaints of the breaſt, one very eſſential point appears to me of the greateſt conſequence for the patient to have effected, that is, to adjuſt by the thermometer, the temperature of the atmoſphere to the morbid ſtate of the body. This may be done in our northern climates, where the

circum-

circumſtances of the ſick will afford it without the inconvenince of changing their place of reſidence.—The extreme antiphlogiſtic regimen, and other treatment of the ſick, ſo ſtrenuouſly inſiſted on by many European writers in this diſeaſe, as well as in all the complaints of the lungs, I am fearful has done much injury in the practice of medicine. I have tried it with all the zeal that Fothergill or Fordyce ever recommended it, and have been foiled in many caſes. For after eight or ten bleedings, with a ſtrong buffy blood every time, the diſeaſe advanced without my being ſenſible of any other change, than a more or leſs diminution of the ſtrength after every ſuch evacuation. Writers in general on the phthiſis that I have peruſed give me but little ſatisfaction. I know of no author, who has ſo clearly and fully deſcribed the glandular conſumption as I could wiſh, and at the ſame time pointed out the true characteriſtic marks, by which they might be known from thoſe ariſing from other cauſes.

In this ſpecies of phthiſis, I am very ſure, little dependance is to be put upon the uſe of the

the lancet : ſtill it is but too common to ſee it recommended.—Dr. Ruſſel, ſome time ſince, favoured the world with a valuable treatiſe on the diſeaſes of the glands ; but as the lymphatic ſyſtem was but very imperfectly underſtood then to what it is now, there is undoubtedly great room for improvement on his eſſays.

One of the moſt valuable medicines that I have ever uſed in the tuberculous or glandular phthiſis, is the vitriolum cæruleum ; for the uſe of which I am principally indebted to the remarks of the bold, dogmatic, and eccentric Maryatt. He adviſes it united with the tartar emetic as a vomit ; butI have found, from experience, that it not only almoſt entirely deſtroyed the emetic power of the tartar by this union, but that it would oftener purge than vomit. To prevent ſuch an injurious operation of this medicine, I now unite the ipecacuanha with the vitriol in lieu of the tartar, which is peculiarly ſerviceable when we wiſh to vomit a phthiſical patient, who has at the ſame time a diarrhœa. For this purpoſe, I commonly give five pills, containing

taining from ſeven to ten grains of each of theſe ingredients, in the morning faſting, and direct that nothing be drank to urge the emetic effect. If five or ſix plentiful evacuations are produced by this doſe, I generally continue the ſame quantity in the ſubſequent vomitings, but if not, I increaſe the doſe to ſix or more pills of the ſame kind. Theſe emetics I frequently repeat every ſecond or third day, according to the irritability of the ſtomach and other circumſtances of the ſick, and in the mean time, give as much as the ſtomach will bear of the antiſeptic mixture of Dr. Griffith's, compoſed of myrrh, ſal martis, and ſal tartar; and by theſe medicines, I can aſſure you, that I have reſtored to health more perſons labouring under a hectic fever from glandular ſuppurations, than by all the other medicines and methods that I have ever read of, or tried from my own invention.

I LOOK on the blue vitriol as one of the moſt ſafe and efficacious emetics, joined with ipecacuanha, that the Materia Medica furniſhes us with—Even in bilious complaints, where there are evident marks of too great an effuſion

effuſion of that fluid into the alimentary tube, I totally reject the antimony and employ the vitriol. For children I have uſed the white vitriol according to the recipe of Dr. Moſely, with very good effect, and eſpecially in the hooping cough, and the ſummer and autumnal fluxes.

In the aſthma, from pituita, weak lungs, and obſtructed viſcera; and in the dyſpeptic ſtate of the ſtomach, I much prefer the vitriol to the tartar emetic, which is ſo often employed to the great injury of thouſands. What makes the vitriol vomit ſo preferable to the oxymel is, its not being productive of the extreme debilitating effect of the latter.

It is ſaid by our old people here, that conſumptions are more prevalent than formerly, but I am not certain as to the juſtneſs of the obſervation. I cured a man two years ago in this place of a tuberculous conſumption, whoſe cough was very ſevere, and who daily diſcharged large quantities of bloody purulent matter accompanied with fœtor. He

was

was much emaciated, had night ſweats, and every evidence of a completely formed hectic. In the courſe of about three weeks, he took twenty-four dry emetics, and perhaps half a dozen ℥viij mixtures of Griffith's antihectic, and confined himſelf to a milk diet. I could enumerate a very conſiderable number of ſimilar caſes, of what is called a ſcrophulous phthiſis, that I have cured without giving any other medicine of conſequence beſides the two above mentioned.

XXVII.

Caſe of Hydrophobia; *by Dr.* George Benſell, *of Germantown. Read Aug.* 7, 1792.

April 16th. I WAS called to the daughter of Jacob Niece, a girl between ſeven and eight years old, who had been bit by a mad dog nineteen days before. The dog had never diſcovered any ſymptoms of diſeaſe until the day before he bit the child, and thoſe ſo

ſlight

ſlight as not to indicate the neceſſity of ſecuring him. He bit the child on Friday the 30th of March in the face, the arm, and ankle, the marks of his teeth were ſcarcely perceptible in the two firſt places, and the blood was barely drawn from the laſt. The dog was immediately tied; and after exhibiting evident marks of madneſs, died on the Sunday following.

THE ſymptoms of *hydrophobia* had made their appearance ſixteen hours before I ſaw the patient, accompanied with uncommon apprehenſion and uneaſineſs at the ſudden approach of any object, otherwiſe there was nothing uncommon in her actions—her ſkin was moiſt, and the heat of her body moderate—her pulſe ſomewhat quickened, but by no means remarkable—her tongue was partially covered with a ſlight whiteneſs, but not dry—and her underſtanding was perfectly ſound. Notwithſtanding there was a peculiar dread, and wildneſs in her countenance, which was ſtrongly expreſſed in every feature, but particularly in the pupil of the eyes, which were uncommonly dilated, although

the poſition in which ſhe lay to receive the light was favourable to producing a contrary effect; this was obſervable in comparing them with the eyes of ſeveral ſpectators in the darkeſt part of the room. She never complained of thirſt, or expreſſed any great deſire to drink, but, at my requeſt, conſented to take ſome. Her father offered to bring a tea-cupful of water. This threw her into great agitation, though he was at the extremity of the room. She begged it might be given to her in a tea-ſpoon; which, though not half full, ſo diſconcerted her, that, until the greater part, was thrown out, ſhe refuſed to touch it; then with a tolerable degree of firmneſs, brought it near her lips, haſtily threw it into her mouth, and ſwallowed it with the utmoſt difficulty and trepidation---uttering deep ſighs, which as they were expired, bore no inconſiderable reſemblance to the whining of a dog when under confinement----I tried to get ſome bread ſoaked in wine into her mouth, but the effect it produced was nearly the ſame.

I DESIRED mercurial friction to be freely uſed, upon her neck, arms, thighs and legs,

being prevented from exhibiting mercury in any other form as well as any other medicine.

In the evening of the ſame day, no conſiderable alteration had taken place; the pupils ſtill continued unnaturally dilated; the whiteneſs of the tongue was not more extended, but appeared in ſpots---its moiſture not diminiſhed---the pulſe perfectly regular---no uncommon thirſt---and the ſurface of the body pervaded with that due degree of heat which might be expected in a perfect ſtate of health.

In the morning of the ſeventeenth, little or no change had taken place, except the difficulty of ſwallowing had ſomewhat abated; which afforded a ray of hope to the diſconſolate parents, and led to a repetition of the mercurial friction.

At three in the afternoon, her apprehenſions at the approach of any thing were conſiderably increaſed---the muſcles that perform the offices of deglutition, were ſtrangely convulſed the moment any kind of liquor touched the fauces, and ſhe appeared to be in dan-

ger of immediate ſuffocation. The pulſe was ſtill uniform and moderate, and no material alteration in the colour of her tongue, and the heat and moiſture of her ſkin.

This evening ſhe was greatly alarmed at the appearance of a dog that had followed one of the neighbours into the room, and expreſſed the greateſt anxiety for it to be turned out.

In the morning of the eighteenth, I found her out of bed and dreſſed; ſhe had begged for her cloaths repeatedly; and her parents could not reſiſt the urgency of intreaty from a beloved child. Hitherto her countenance was florid, but now it was overſpread with a general paleneſs---yet I diſcovered no alteration in the pupils of her eyes, which were, if any thing, rather more dilated than on the preceding days. She always expreſſed the greateſt joy in ſeeing me, and, though conſcious of being ill, uniformly declared ſhe felt no pain. I repeatedly aſked her, why, if ſhe felt no pain, ſhe did not ſwallow the drink given to her? She replied that ſhe would; but every attempt demonſtrated the impoſſibility---her pulſe at this time was perceptibly lower,

and

and the ſpaſms were more frequent and more generally extended.

At four o'clock in the afternoon, I was greatly ſhocked at her ſituation—every ſymptom had evidently increaſed---the ſpaſmodic conſtriction was general, and the pupils of her eyes were ſo enlarged as to leave but a line by which their colour might be known ---her pulſe was ſcarcely to be diſtinguiſhed, and the whiteneſs of her tongue had changed to a browniſh colour, yet even at this peperiod her underſtanding was not the leaſt deranged.

She had hitherto thrown up none, or very little phlegm: but from a very ſingular action of the tongue, which was occaſionally thrown out of the mouth, and performed with inconceivable quickneſs, a kind of vibratory motion enſued, by which ſomething like froth was produced and with difficulty ſpit out. At this time her dread of every thing was greatly augmented, and a quantity of viſcid phlegm was at intervals brought up, generally tinged with blood.

In proportion as this was multiplied her efforts to throw it up became ſtronger, and all the muſcles in the body were more or leſs agitated in bringing this about. A kind of undulatory motion might ſtill be felt at the wriſt. At ſix o'clock, when the phlegm, which was now conſtantly propelled to the mouth, had been cleared but for a moment, ſhe would ſtill ſpeak to her parents rationally. At ten o'clock at night, the efforts of nature ſeemed to be exhauſted, and this ſcene of human miſery was ſoon to be cloſed—at eleven ſhe expired.

I shall forbear to make obſervations on this caſe, any further than to mention, that the patient had taken the celebrated medicine of *Goodman's in Philadelphia*, agreeably to his directions—that eight drachms of ſtrong mercurial ointment had been uſed at different periods of the diſeaſe—that ſhe had frequently made uſe of the warm bath, and that an epiſpaſtic had been applied to the ſcar which remained from the only wound by which this wonderful poiſon could have been conveyed into the ſyſtem—that no inflammation was produced either upon the ſcar or on the ſurrounding parts

parts that the plaiſter occupied—that ſhe never complained of any pain in the part before or after the bliſtering plaiſter was applied—that the wound had not the leaſt morbid appearance—and that the ſpaſms and muſcular exertions were more frequent, and of longer duration as the diſeaſe advanced, from its firſt invaſion to the final period.

XXVII.

Remarks on the Effects of Corroſive Sublimate, in Cancerous Affections. Extracted from a Letter from Iſaac Senter, *M. D. to Dr.* William Currie ; *with additional Remarks by Dr.* Currie. *Read September* 4, 1792.

I AM apprehenſive that the account which Dr. Moſely has given of the efficacy of the ſublimate of mercury, in the cure of cancers, is not derived from that mature degree of experience and obſervation which is requiſite

quiſite, when ſuch a corroſive and dangerous ſubſtance is recommended to the world.

Some years before his treatiſe on tropical diſeaſes was publiſhed, I had been a witneſs to the tragical effects of this rugged eſcharotic in ſeveral inſtances in the town. It was employed by a very daring and unprincipled Quack who reſided here at that time—He deſtroyed the lives of no leſs than three grown perſons with it, to my knowledge, in the courſe of a few days. The firſt had an anthrax on the back, the ſecond a ganglion of the flexor tendon of the inſtep, and the other had a real cancer of the breaſt. In the firſt, a mortification was produced which ſpread to the inteſtines. The ſecond died convulſed ſoon after the application. And the third, of a moſt rapid hectic. Several other perſons in the vicinity of this place were alſo killed by the application of his ſublimate plaſters; and a negro man with a fungous excreſcence on his penis, would have loſt his life by the ſame application, if I had not ſaved him by amputating it above the ſphacelus occaſioned by it.

THE pain occaſioned by theſe plaſters was excruciating, and was communicated to all parts of the ſyſtem.

I AM at the ſame time, certain from my own experience of this medicine, as a topical application in cancerous affections, that it is capable of doing much good in ſome habits, if applied with a very cautious hand, and guarded by the uſe of opium. But my experience convinces me (notwithſtanding what Dr. Moſely has aſſerted to the contrary) that it deſtroys the living ſound, and organic fibre, inſtead of detaching the morbid and inorganic parts by exciting inflammatory action. I have uſed the ſublimate in a great variety of ſchirrous, ſcrophulous and fungous tumours, and ſeveral cancers, and have paid no ſmall attention to its effects in the parts diſeaſed as well as in the ſyſtem at large, but I can aſſure you that I have never ſeen a real cancer cured by it, or by any other *corroſive* application, either in my own hands, or when uſed by others.

THE uſe of corroſive ſublimate as a topical application in cancers is no new practice. Fallo-

Fallopius, Penot, Theodoric, and Valeſius uſed it mixed with arſenic ; and Boerhaave in his Chemiſtry, and Van Swieten in his Commentaries, both mention it, (if my memory ſerves me) as a powerful, though dangerous, eſcharotic in diſeaſes of this kind."

In addition to the obſervations of Dr. Senter, the tranſcriber begs leave to add, that he has applied the corroſive ſublimate to ſeveral ulcerated cancers ; but inſtead of effecting a cure by it, has generally accelerated the exit of the patients.

In two caſes where the cancer was ſituated on one of the lower limbs, it not only increaſed the ulceration, and produced an extenſive and painful inflammation, but occaſioned the diſeaſe to be conveyed to the inguinal gland of the affected ſide ; in conſequence of which, both patients after ſuffering ſome months an increaſe of miſery, expired. From the pernicious effects of ſublimate, he has been deterred from making trial of arſenic ; the operation of which appears to depend on a ſimilar quality.

If the action of the common cauſtic could be ſufficiently limited, perhaps (from the immediate ſphacelus it produces in the affected part) it might be employed with more certainty and ſafety than any thing elſe, except the knife.

XXVIII.

Caſe of Hydrocephalus Internus, attended with equivocal ſymptoms, with the appearances on diſſection. By Dr. William Currie.—*Read April* 2, 1793.

I VISITED a mulatto boy, between ſeven and eight years of age, on the thirteenth of March laſt, at which time his pulſe was low and irregular, and his ſkin hot and dry. His countenance had a vacancy of expreſſion reſembling that of an ideot—his tongue whitiſh and parched in the middle, but red and moiſt at the ſides. While I was examining his pulſe and eyes he moaned very much, and upon being aſked what ailed him, he replied his head-ached, and that he was very hungry.

His

His miſtreſs informed me that he had firſt begun to complain on the tenth of March, at which time he ſaid his head-ached very bad; that he had a giddineſs in it, and a trembling in his limbs; ſoon after which he went to bed, and had not been able to leave it ſince*.

He anſwered pertinently to every queſtion, and could diſtinguiſh objects at this time perfectly.

From the ſtupidity and inſenſibility indicated by his eyes, I ſuſpected that he was affected by the hydrocephalus internus, but there was no double viſion or ſtrabiſmus; and being informed that he had lived, previous to the laſt month, with his mother, a worthleſs debauched woman, through whoſe incapacity and negligence he had frequently been nearly famiſhed, I was at a loſs to determine whether his ſymptoms were occaſioned by water in the ventricles of the brain, or by the irritation of worms in the inteſtines.

Though

* I have been ſince informed that this boy had, for a long time, appeared very dull and ſtuped; and that he was conſtantly either ſleeping or eating from the time he had changed his abode, which was about five weeks previous to his confinement.

Though ſeveral of the ſymptoms, as well as ſome of the circumſtances which favour the generation of *typhus fever*, were preſent, yet his appetite, which was conſtant and inſatiable, left no room to ſuppoſe the complaint to be of that nature.

After I had compared and conſidered every circumſtance with the moſt ſcrupulous attention, I concluded to employ ſuch medicines as experience had proved to be moſt effectual for the expulſion of worms; and which, with very little variation, have alſo ſucceeded beſt in caſes of hydrocephalus.

My firſt preſcription, therefore, was calomelgr. iij. ſacch. alb. gr. x. ol. menth. piper. gutt. i. This I directed to be taken at one doſe, and to be repeated every fourth hour till it ſhould operate three or four times. After the exhibition of the third doſe, a copious diarrhœa came on, and ſeveral large worms were diſcharged.

14th. His ſtrength was ſo much exhauſted by the operation of the calomel, that I diſcontinued it, and directed a ſtrong infuſion of Caryophillus Indicus (ſpigelia of Linnæus) to be adminiſtered three times a-day. An

almoſt

almoſt incredible number of *lumbrici* were voided in the courſe of the night.

15th. APPEARED much debilitated to-day, and was conſiderably comatoſe, but had neither ſtrabiſmus nor ſpaſmodic affections of the eye-lids, though the pupils were very much dilated—ſkin cool—pulſe ſlow and irregular. Directed a bliſter to his back, and a repetition of the ſame medicines as yeſterday, with an addition to his wine, which he had been allowed to take liberally from the beginning, mixed with water, or made into whey; and to continue his diet of panada and chocolate; the latter he appeared to be very fond of. He was alſo indulged with bread dipt in molaſſes, which he had conſtantly craved, and had eaten voraciouſly previous to the acceſſion of coma.

16th. INFORMED that he had ſeveral involuntary ſtools, and had made a great deal of urine in the night, but that no more worms had appeared.

THE pink root was now diſcontinued, and a ſtrong decoction of cort. peruv. and ſerpentar. virgin. ſubſtituted.

SINAPISMS

SINAPISMS to his feet, boluſſes of volatile alkali, &c. were tried to be adminiſtered, but he could not be prevailed on to ſwallow them—A julep of the ſame was ſubſtituted, &c.

17th. SYMPTOMS of coma—inſenſibility and general debility increaſed—deglutition impeded—evacuations by ſtool and urine continue. A bliſter was now applied to his head, and ſinapiſms to his wriſts and ancles: Muſtard whey was alſo directed, but he refuſed to ſwallow every thing that was offered.

18th. HE laid all this day in a ſtate of the moſt profound inſenſibility, with his eyes and mouth wide open; and continued in this manner till the night following, when he expired.

Appearances on Diſſection.

ON removing the cranium I obſerved that the *dura mater* was not attached to it any where but at the ſutures, which is contrary to the aſſertions of both Haller and Pott.

THE dura mater as well as the external part of the brain, was free from any morbid appearance—but, when an inciſion was made into the ventricles, between ſix and ſeven ounces, at leaſt, of a limpid fluid was diſcharged, and received into a veſſel.

Remarks.

IN this caſe all the ſymptoms mentioned by authors, as pathognomonic, (except a conſtant moaning) viz. ſtrabiſmus, double viſion, ſick qualms, ſudden and frequent ſhrieking, and holding the head with the hands, ſtridor, dentium, were abſent; nor was there that inſenſibility of the bowels common to compreſſed brain.

THIS is a freſh inſtance of the difficulty which often occurs of diſtinguiſhing the ſeat and nature of diſeaſes; of the importance of acquiring a perfect knowledge of the character of every diſeaſe to which the human body is liable; and of the propriety of frequent diſſections for the purpoſe of acquiring this knowledge.

END OF THE FIRST PART.